

Users' Guide to USAID/Washington Population, Health and Nutrition Programs

**Bureau for Global Health
U.S. Agency for International Development**

2003



Users' Guide to USAID/Washington Population, Health and Nutrition Programs

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U.S. Agency for International Development**

March 2003

Foreword

Welcome to the 2003 edition of the Users' Guide to the USAID/Washington Population, Health and Nutrition (PHN) sector. The main purpose of the guide is to provide information on USAID/W resources available to support USAID PHN programs in the field, and how to access them. The guide is intended mainly for use by USAID PHN field staff. The guide consists primarily of descriptions of PHN projects managed by the Bureau for Global Health (GH), Regional Bureaus, and the Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA). The 2003 edition includes several new features:

- a description of the structure and functions of the new Bureau for Global Health (GH);
- a listing of USAID/W PHN staff with their main function and contact information;
- mailing addresses for PHN missions;
- a redesigned list of Country Coordinators and Country Teams that includes HIV/AIDS point persons and, for each PHN country, the name of the mission director and a comprehensive list of PHN staff;
- a list of PHN-relevant acronyms;
- a directory of GH services to the field.

Kindly note that this guide is also available on the USAID website at:

- GH homepage: http://www.usaid.gov/pop_health/
- User's Guide online: http://www.usaid.gov/pop_health/resource/phnug.htm

Please contact Mike Gibson/Pal-Tech (mgibson@gh.pal-tech.com) to request copies of the guide, and to provide updates or corrections. The next update of the online Users' Guide will be in September 2003.

Sincerely,

E. Anne Peterson, MD, MPH

Assistant Administrator

Bureau for Global Health

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Global Health: Achieving Results for the World's Families

Introduction

U.S. Agency for International Development (USAID) health programs represent the commitment and determination of the United States government to save lives, prevent suffering, and create a better future for families in the developing world.

USAID has been meeting global health challenges for more than 40 years. Combining on-the-ground experience, innovative technologies, and global leadership, USAID seeks to protect health and save lives through a variety of programs in many countries.

From 1985-2001, USAID provided approximately \$15.2 billion in population, health and nutrition (PHN) assistance to developing countries, making it the largest international donor in the sector in the world. In FY 2002, appropriations for the health sector totaled \$1.52 billion.

USAID programs have:

- Helped reduce child mortality by over 30 percent in the last two decades.
- Pioneered the use of lifesaving oral rehydration salts, which have reduced child deaths from diarrheal disease by 50 percent since 1990.
- Supported global polio eradication, with the number of reported polio cases declining by 99 percent from 350,000 in the 1980s to 2,400 in 2000.
- Helped reduce the average number of children born to couples worldwide by one-third since 1960, thus contributing to improved family health.
- Contributed significantly to averting HIV infections in a number of countries.

Formidable challenges remain, and USAID is addressing these challenges in our areas of focus:

Maternal Health: The World Health Organization estimates that 515,000 women die every year from maternal causes, 99 percent of them in less developed countries. USAID is reducing these numbers by supporting services for women before and during pregnancy and childbirth. A healthy mother is key to her child's survival and health and to improved household productivity and income. Nutrition, prenatal care, clean and safe deliveries, postpartum care, immunizations, and counseling are cornerstones of USAID's strategy.

Child Health and Nutrition: Diarrheal diseases killed nearly two million children under age five in 2001. Malnutrition is a factor in more than half of the child deaths in developing countries. Since 1985, USAID's programs in child survival have contributed to a 10 percent decline in infant mortality in USAID-assisted countries. USAID and its partners provide critical lifesaving services that prevent more than four million infant and child deaths annually. These services include support for nutrition, breastfeeding, and infant care during the first seven days of life when newborns are more at risk of death from infection or disease. Also included are basic child health services, including immunization, micronutrient supplementation, diarrheal disease control and prevention, improving access to sanitation and hygiene, and research into key child survival issues.

HIV/AIDS: Of the world's 42 million people with HIV/AIDS, 95 percent live in developing countries. The United States is the world leader in responding to the global HIV/AIDS pandemic. USAID is assisting more than 50 countries and is increasing resources in 23 countries considered to have the highest need. USAID's strategy includes prevention of new infections; care for people living with HIV/AIDS; support for children affected by the epidemic; surveillance and technical leadership; and reduction of stigma, discrimination, and ignorance.

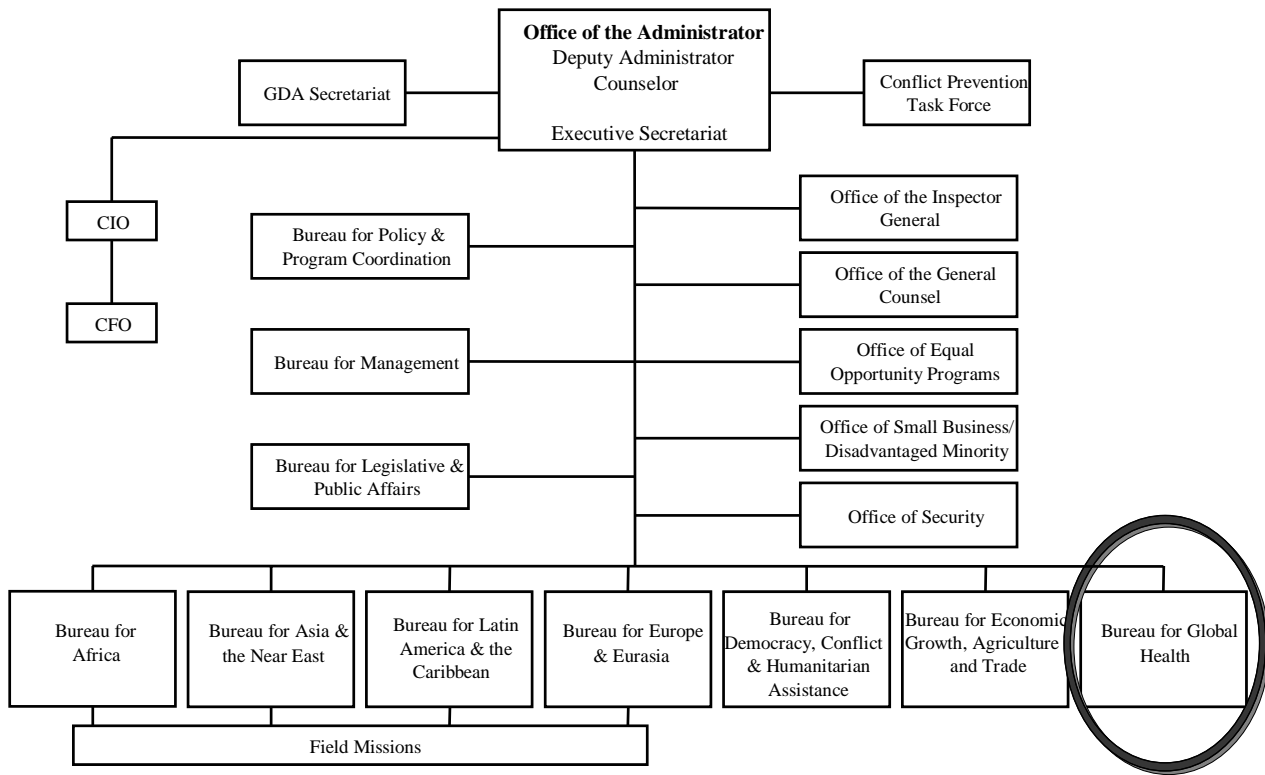
Infectious Diseases: Each year, tuberculosis kills more than two million people. Malaria kills an estimated 2.5 million. USAID has been a leader in fighting infectious diseases for decades. USAID focuses on preventing diseases such as malaria and tuberculosis while strengthening health and surveillance systems to control disease. These efforts include support for training, research and surveillance, and combating drug resistance. USAID's drug management programs improve access, supply, and use of pharmaceuticals critical for reducing drug-resistant TB.

Family Planning and Reproductive Health: Full availability of voluntary family planning can reduce by 25 percent the more than 515,000 maternal deaths and 11 million infant deaths that occur annually. Family planning is a critical component in primary health care for women and their families. Family planning helps women and couples delay first pregnancies, plan their pregnancies, space births at three- to five-year intervals, avoid pregnancies late in life, and reduce women's risk of contracting HIV/AIDS and other sexually transmitted infections. Since 1965, USAID has been a world leader in providing services and programs in family planning, contributing to a quadrupling in the use of modern contraceptives in the developing world.

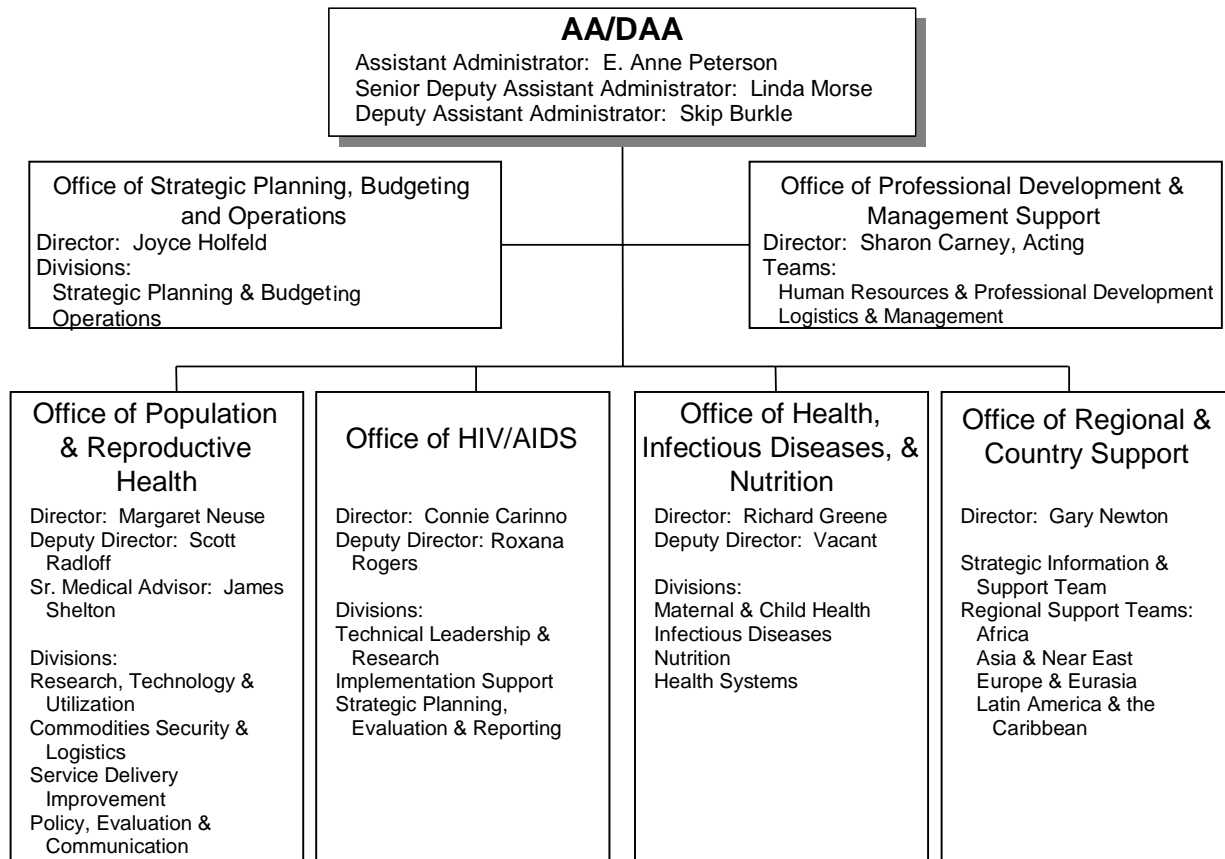
Agency and Bureau for Global Health Structure

Organizational charts for the Agency and the Global Health Bureau follow:

USAID



Bureau for Global Health



Bureau for Global Health Roles and Objectives

The Bureau for Global Health (GH) defines its three main roles as follows:

- Superior technical support to the field – USAID follows a field-driven, field-oriented, and field-based approach to developing and testing new technologies and methodologies. This approach to program design has a long history of success and has been instrumental in diffusing technologies and innovations from the north to south and from south to south.
- State-of-the-art research – USAID is a world leader in research involving collecting, analyzing, documenting, and disseminating data in biomedical, operations, demographic, evaluation, applied, and social science research. Research builds the scientific and empirical base for designing and implementing effective, efficient, and high quality health programs and is the underpinning for many of the Agency's successes.
- Global technical leadership – Leadership in the population, health, and nutrition sector requires technical expertise, innovation, and the capacity to build and maintain successful partnerships. Remaining on the cutting edge of technology entails: mediating competing needs and goals; facilitating the identification of shared values and common priorities, and establishing effective working relationships. The Bureau's leadership is based on many components, including promoting strategic approaches, leadership with partners, expanding technical capacity, pioneering efforts in monitoring and evaluation, and applying best practices and research findings in policies and programs.

GH has focused its resources and built its portfolio on the synergies of these three roles and continues to expand and improve its programs to meet changing public health needs and the realities of the field. The Bureau's programs are directed to the following five strategic objectives:

- Increased use by women and men of voluntary practices that reduce fertility;
- Increased use of key maternal health and nutrition interventions;
- Increased use of key child health and nutrition interventions;
- Increased use of improved, effective, and sustainable responses to reduce HIV transmission, and to mitigate the impact of the HIV/AIDS pandemic; and
- Increased use of effective interventions to reduce the threat of infectious diseases of major public health importance.

Bureau for Global Health Staffing and Office Functions

Bureau staff manage an array of technical projects, providing technical support to USAID missions and field programs, garnering support for our programs with stakeholders, and nurturing and galvanizing stronger partnerships with the development community. This global leadership is influencing the worldwide health agenda, increasing the likelihood of successful health programs and encouraging the wider global community to adopt new technologies and approaches and pursue USAID priorities and goals. Summary functional statements for GH Bureau offices follow:

Office of the Assistant Administrator (AA/GH)

The Office of the Assistant Administrator provides oversight for GH programs, support to the field, research, legislative relations, and external affairs. The Assistant Administrator supervises two Deputy Assistant Administrators and a small support staff.

Office of Strategic Planning, Budgeting and Operations (GH/SPBO)

The Office of Strategic Planning, Budgeting and Operations has primary responsibility for the Bureau's strategic planning, budgeting, programming and procurement functions. The Office provides leadership, advice and support for overall strategic direction, resource allocation, and procurement planning. It further supports efforts to monitor and promote the effectiveness of programs and the achievement of GH objectives, and is integrally involved in performance monitoring and program evaluation. Additionally, SPBO houses the Partnership Team which takes the lead in donor coordination activities for the Bureau.

The Office is led by a Director and is made up of two divisions:

Strategic Planning and Budgeting Division (GH/SPBO/SPB) serves two major functions: (a) undertakes strategic planning, which includes overall sector and program planning, policy, monitoring and evaluation, and serves to coordinate such activities within the Bureau and with other units within the Agency; (b) prepares and monitors the Bureau's budget's, which includes the management of the Bureau OYB, and monitors the Bureau's pipeline.

Operations Division (GH/SPBO/OPS) is responsible for providing programmatic support to bureau technical office staff, from activity design through implementation. It also takes the lead in procurement planning, monitoring and tracking of all procurement actions.

Office of Professional Development and Management Support (GH/PDMS)

The Office of Professional Development and Management Support carries out the professional staff development, personnel, administration and management functions of the Bureau for Global Health. PDMS staff manage the professional development activities (including training) and work assignments in Washington and overseas. PDMS coordinates intra-bureau teams in the areas of human resources and development programs, human resources planning, and space. It also works with Bureau offices and M/HR on the assignment, promotion, training, career development, and performance evaluation of Bureau employees, as well as those deployed in the PHN sector worldwide.

Specific responsibilities include: management of sector human resources processes and projects for the full range of direct and non-direct hires both assigned to the Bureau and for other bureaus; management of all training and professional development activities for the PHN sector; oversight of the Bureau's HR data base system, Direct Hire and Non-Direct Hire incentive awards, performance evaluations, security, employee counseling and staffing allocations; oversight of the Operating Expense (OE) budget; management of vital records and Continuation of Operations Plan; and management of administrative services, space planning, procurement, and office supplies.

PDMS supports the professional development of technical staff through: promoting useful and innovative tools and approaches for managers and leaders to help them supervise, mentor, coach, motivate and give performance feedback; offering high-impact professional development events that enable staff to build skills, knowledge and improve their performance; providing a work environment that pays attention to space, equipment, supplies, and security; helping staff use relevant, appropriate guidance, policies, procedures and regulations; and providing technical assistance in aligning and organizing staff.

PDMS is led by a Director and is composed of three teams that are responsible for professional development, human resources, and administrative services.

Office of Regional and Country Support (GH/RCS)

The Office of Regional and Country Support's overall goal is to improve services and support to the field, acting as the locus of the regional and country support functions in the Bureau for Global Health. The Office objectives include to: provide information to the field that is strategic and timely; implement a technical assistance system under which field needs are determined, prioritized, met and monitored; allocate PHN technical assistance strategically; and ensure advocacy for mission programs. To achieve these and other objectives, the Office staff perform a variety of functions including:

Country Coordination: ensure countries are supported by a trained country support team.

Technical Assistance: provide or arrange technical assistance to missions, including strategy development, program/project designs, sector assessments and other technical needs.

Logistical and Administrative Assistance: provide administrative and logistical assistance to field staff, including scheduling Washington visits, arranging strategy reviews, and supporting a range of field needs.

Coordination with Other Bureaus: collaborate with regional bureaus to ensure technical support to the field, mission staffing needs are met, strategy assistance provided, strategies/critical documents reviewed, and regional health trends are analyzed and responded to.

Dissemination of Critical Information: develop communication tools to provide critical information to the field, including the PHN Users' Guide, PHN Newsletter, and monthly mailings.

Respond to Field Training Needs: work with regional bureaus and GH/PDMS to meet the training needs of field staff through state-of-the-art (SOTA) conferences and regional PHN meetings.

Monitor GH Responsiveness to the Field: monitor GH performance in supporting the field.

The Office is led by a Director and is composed of four regional teams — Africa, Latin America and the Caribbean, Europe and Eurasia, and Asia and the Near East — and a team of field technical advisors to meet pressing needs across regions. The Office staffs the PHN Sector Council and the Office Director represents the Bureau in the FS assignment process, and coordinates the PHN NEP program.

Office of HIV/AIDS (GH/OHA)

The Office of HIV/AIDS is the locus of HIV/AIDS technical leadership for the Agency and has primary responsibility for the Agency's HIV/AIDS program. This responsibility entails: ensuring the technical integrity of Agency and mission strategies; providing global technical leadership on the full range of issues related to HIV/AIDS prevention, care, and treatment; managing numerous research and field support programs; and monitoring and reporting on the impact of the Agency's HIV/AIDS program

The Office is led by a Director and is comprised of three divisions:

Technical Leadership and Research Division (GH/OHA/TLR) provides technical advice and support across the Agency and field missions and has primary responsibility for HIV/AIDS research in areas relevant to Agency goals and objectives.

Implementation Support Division (GH/OHA/IS) focuses on the provision of assistance to accelerate and scale-up HIV/AIDS programs in the field.

Strategic Planning, Evaluation, and Reporting Division (GH/OHA/SPER) provides programmatic expertise to help the Agency and its missions develop strategies and programs that respond to USG, USAID, and Congressional policy and budget priorities and incorporate innovations, best practices, and lessons learned.

Office of Population and Reproductive Health (GH/PRH)

The Office of Population and Reproductive Health is responsible for providing strategic direction, technical leadership and support to field programs in population, voluntary family planning and reproductive health. It manages programs that advance and apply state-of-the-art technologies, expand access to quality services, promote healthy behaviors, broaden contraceptive availability and choices, and strengthen policies and systems to address family planning and reproductive health needs.

The Office is led by a Director and is composed of four divisions:

Research, Technology, and Utilization Division (GH/PRH/RTU) provides technical leadership in building scientific and empirical knowledge and ensures its use in the design and implementation of effective, efficient, high-quality family planning and reproductive health programs.

Commodities Security and Logistics Division (GH/PRH/CSL) promotes the long-term availability of a range of high-quality contraceptives, condoms and other essential health supplies.

Service Delivery Improvement Division (GH/PRH/SDI) develops and applies innovative strategies that improve the performance of individuals, organizations and systems for the sustainable delivery of quality family planning and related services.

Policy, Evaluation, and Communication Division (GH/PRH/PEC) (bureau-wide responsibilities) works across the entire portfolio of Global Health activities to improve the collection, analysis and use of data in policymaking and program planning; and promotes policies, behavior change and community norms, which result in improved reproductive and health outcomes.

Office of Health, Infectious Diseases and Nutrition (GH/HIDN)

The Office of Health, Infectious Diseases and Nutrition manages a diverse portfolio within the Bureau for Global Health. It is responsible for sector-wide strategic planning; technical leadership; coordination with external partners; and numerous operational programs in child survival, maternal health, nutrition/micronutrients, infectious diseases, environmental health, health policy, and health systems strengthening, monitoring, reporting, and performance management. The program portfolio also includes service delivery programs and an ambitious agenda of biomedical, applied, and operations research.

The Office is led by a Director and is composed of four divisions:

Maternal and Child Health Division (GH/HIDN/MCH) is responsible for providing technical leadership and direction in child survival/child health and maternal health. Division teams focus on child health and survival; polio; child and maternal health research; vaccine introduction and new technologies; maternal health/survival; and safe motherhood initiatives.

Infectious Diseases Division (GH/HIDN/ID) is responsible for technical leadership and direction in infectious diseases and environmental health issues. Division teams focus on infectious diseases generally, as well as malaria, TB, and environmental health (both water-borne and vector borne diseases).

Nutrition Division (GH/HIDN/N) is responsible for technical leadership and direction in food and nutrition. Division teams focus on infant feeding and breastfeeding, micronutrients, food supplementation, and applied nutrition programming in the public, private and nonprofit sectors. The Nutrition Division also houses the Child Survival and Health Grants Program (CSHGP) which facilitates a productive partnership between itself and private and voluntary organizations (PVOs). Together, CSHGP and PVOs support community-oriented child survival programs that measurably improve infant and child health and nutrition, and that contribute to the education of infant and child mortality in countries throughout the world.

Health Systems Division (GH/HIDN/HS) (bureau-wide responsibilities) works across the entire portfolio of Global Health and is responsible for technical leadership and direction in health systems strengthening. Division teams focus on health policy, quality assurance, workforce policy, pharmaceutical management and standards, and information, monitoring, and evaluation.

Project Directory

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Office Director, Margaret Neuse

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Senior Medical Advisor, James Shelton

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Chief, Mark Rilling

Policy, Evaluation & Communication Division (PEC)

Chief, Ellen Starbird

Research, Technology & Utilization Division (RTU)

Chief, Jeffrey Spieler

Services Delivery Improvement Division (SDI)

Chief, Michele Moloney-Kitts

Central Contraceptive Procurement

Cooperating Agency	N/A
Project Number	936-3057
Contract Number	Various
Duration	1990-2008
Geographic Scope	Worldwide

Purpose: To provide an efficient mechanism for consolidated USAID purchases of contraceptives based on the transfer of all funds from USAID accounts that support contraceptive procurement to a single central procurement account at the beginning of each operational year. CCP also administers the Commodity Promotion Fund, which serves HIV/AIDS prevention activities worldwide.

Description: This project was established in FY 1990 to provide an efficient central contraceptive procurement mechanism for all USAID programs that respond to the request for contraceptive supplies. Funds are transferred annually to this project through field support and OYB transfers from each of the USAID accounts that support contraceptive procurement. GH/PRH directs the use of these funds through a series of procurement contracts to provide contraceptive supplies for USAID programs worldwide. This project consolidates the procurement actions, but leaves responsibility for the estimation of contraceptive needs in the USAID offices that support family planning delivery systems. The central procurement system undertakes the purchase of several differently-packaged condoms; oral contraceptive pills; vaginal foaming tablets; NORPLANT® implants; the Copper T-380A IUD; female condoms; and the injectable Depo-Provera®. For details on formulation, brands, prices, contract terms, and ordering procedures, please refer to GH/PRH guidance for estimating contraceptive procurement needs. All shipping and warehousing of USAID-supplied contraceptives is provided by Panalpina, Inc.

The Central Contraceptive Procurement (CCP) project also provides a mechanism for independent testing of the contraceptives purchased by USAID to monitor quality assurance of contraceptives donated to USAID programs. The contraceptive quality assurance component of CCP has two features: (1) pre-acceptance surveillance and testing of contraceptives purchased by USAID to ensure that the product complies with the contract specifications, and (2) to test contraceptives already in the field in response to complaints and/or concerns about the product quality. The quality assurance testing is implemented by Family Health International as part of the Contraceptive Technology Research Project (See the Research section of this guide).

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Contractors may change annually because of competitive contract procedures. Fiscal year 2003 contractors include:
 FEI Products, Inc.;
 Leiras Oy;
 Wyeth-Ayerst International Ltd.;
 Pharmacia;
 Female Health Company;
 Alatech Healthcare Products;
 Panalpina;
 Custom Serices International (CSI)

DELIVER

Cooperating Agency	John Snow, Inc
Project Number	936-3089.01
Contract Number	HRN-C-00-00-00010-00
Duration	9/00 - 9/05
Geographic Scope	Worldwide

Purpose: DELIVER is a five year, worldwide technical support contract focused on providing health commodity logistics support to the PHN sector. DELIVER provides commodity management support to the Agency's family planning, HIV/AIDS, child survival and other health initiatives. The efforts are intended to improve the availability of health commodities including contraceptives, condoms, and other essential drugs at service delivery points (SDPs).

Description: Work within the contract has the following four characteristics:

- 1) DELIVER provides to the field, basic family planning and health logistics assistance focused on the delivery of commodities to SDPs. This assistance includes capacity-building in forecasting, procurement, distribution, management, information systems, and other functions.
- 2) DELIVER offers a broad capacity for technical assistance to improve distribution of contraceptives and other health commodities in integrated health commodity environments, decentralized systems, and systems in which private sector providers have a significant role.
- 3) DELIVER provides support for resource mobilization and the coordination of available resources for commodities and logistics at the donor, lender, and country levels. In particular, this assistance is intended to address issues of contraceptive security.
- 4) DELIVER offers Missions assistance in preparing annual contraceptive procurement tables (CPTs) and supports USAID/W management of the Central Contraceptive Procurement (CCP) project as well as CCP's management information system and database.

DELIVER can accept any funding type appropriate for the work requested.

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Expert Studies of Population Issues

Cooperating Agency	National Academy of Sciences (NAS)
Project Number	936-3078.03
Agreement Number	HRN-A-00-00-00012-00
Duration	10/00-9/05
Geographic Scope	Worldwide

Purpose: To support the National Academy of Sciences' Committee on Population in conducting research on population issues of special interest to the international population community.

Description: The Committee organizes panel studies, conferences, workshops, and meetings designed to synthesize and elicit research on macro issues in population, reproductive health, and family planning that will confront USAID and its development partners in the next decades.

The Committee's agenda is formulated on a continuing basis at its meetings, and between meetings in staff discussions with sponsoring agencies. Current topics include urban population dynamics and transitions to adulthood, including sexuality and reproductive health, marriage and family formation, education, and work in developing countries.

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The Health Communication Partnership (HCP)

Cooperating Agency	Johns Hopkins University (JHU/CCP)
Project Number	936-3091.01
Agreement Number	GPH-A-00-02-00008-00
Duration	7/02 – 7/07
Geographic Scope	Worldwide

Purpose: To support behavior change communication in the areas of Family Planning, Child Health, Maternal Health, HIV/AIDS and Infectious Diseases at the individual, community and national level.

Description: The Health Communication Partnership (HCP) project is a follow-on activity to the Population Communication Services (PCS) project. Like its predecessor activity, HCP provides technical expertise and financial support for strategic communication interventions in developing countries, with a focus on a) program analysis; b) strategy development; c) materials design, pre-testing and production; d) capacity building and sustainability; and e) impact evaluation. Important differences between PCS and the HCP project, however, include the latter activity's readiness to work across all five of the Agency's PHN sector strategic objectives; the new project's stronger focus on interventions at the level of the community, including efforts to influence social norms that relate to health practices; and the ability of USAID Missions and regional bureaus to access the cooperative agreement through "Associate Awards" that provide enhanced control and oversight options not possible in the case of buy-ins or Field Support funding.

Illustrative areas in which HCP resources can be applied include the development of national health communication strategies; promoting community action, mass media and entertainment-education to improve health practices; support for national immunization days/weeks; the branding of health products and services; distance education for service providers; and development of innovative ways to reach youth, reduce stigma among Persons Living with HIV/AIDS (PLWH), and improve South-South communication and collaboration.

Partners: Academy for Educational Development (AED), Save the Children, International HIV/AIDS Alliance (IHAA), University of North Carolina/Chapel Hill, and the Tulane University School of Tropical Medicine and Public Health.

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Information and Knowledge for Optimal Health (INFO)

Cooperating Agency	Johns Hopkins University (JHU/CCP)
Project Number	936-3091.02
Agreement Number	GPH-A-00-02-00003
Duration	9/02-9/07
Geographic Scope	Worldwide

Purpose: Information, knowledge and best practices for family planning/reproductive health and other health accessed by multiple audiences.

Description: The INFO project is designed to provide assistance with communication, information, knowledge-sharing, publication and dissemination activities within global, regional and national health programs. Activities will employ communication tools such as journals and other publications, CD-ROMs, the Internet, and other technologies. The activities will serve as a catalyst and a tool for improved exchange of information and a more complete knowledge base. Core funds will develop and enhance knowledge communities and networks so that a worldwide and common base of knowledge for practice and policy can be created. With mission funds, the project will strengthen and enhance the capacity of local, developing country institutions; and build the skills to produce, disseminate and use FP/RH and other health information and materials that address the distinct and unique needs of local communities.

Some of the services under this award include Population Reports, *The Essentials of Contraceptive Technology* handbook, POPLINE and *International Family Planning Perspectives*, published by The Alan Guttmacher Institute. The project is also able to produce short, content specific publications or tailored CD-ROMs as desired.

Leader with Associate Award: This activity is a Leader with Associate Cooperative Agreement (LWCA). The Leader Award has one CTO located in USAID/W. While this global LWA is similar to a traditional Cooperative Agreement (CA), this instrument is designed to facilitate participation by Missions & Regional Bureaus. As with a traditional CA, an operating unit can commit field support funding to this award. Additionally, an operating unit can choose to develop its own stand-alone cooperative agreement or grant (Associate Award) with JHU/CCP. In awarding an Associate Award the Mission or Bureau does not need to repeat the competition process, as long as the Associate cooperative agreements or grants are consistent with the general program description of the Leader Award. The Agreement Officer in the operating unit issuing the Associate Award and the GH CTO will jointly determine with the Mission CTO whether the program description of the Associate Award is consistent with the Leader Award program description. Associate Awards will be awarded to the recipient of the Leader Award; subgrantees and subcontractors are not eligible to receive stand-alone Associate Awards.

Subagreements: Analytical Systems, Inc. and The Alan Guttmacher Institute.

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Healthy Families, Healthy Forests

Population-Environment Associate Award of the Global Conservation Program

Cooperating Agency	Conservation International (see list of potential NGO cooperators below)
Project Number	936-3093.04
Contract Number	GPH-G-02--00010-00
Duration	09/02-09/04
Geographic Scope	Worldwide

Purpose: To facilitate the delivery of family planning and information in areas where population growth threatens biodiversity or endangered species.

Description: The project works to create partnerships with reproductive health organizations to deliver integrated programming on population and reproductive health (RH) to communities inhabiting globally significant areas of biodiversity. The goal is to address population-based threats to biodiversity while capitalizing on programmatic synergies achieved by combining RH activities with conservation/natural resource management activities. The process includes, but is not limited to:

- conducting demographic analyses of biologically unique areas to determine trends in population growth, distribution, migration, contraceptive use and maternal and infant mortality;
- researching the distribution and type of family planning and related services available to communities in the focus area;
- forging partnerships with government and non-government reproductive health programs to deliver reproductive health/family planning activities in selected sites where cooperating agencies are also conducting conservation and/or natural resource management activities;
- working with partners to develop activities that functionally link reproductive health education with conservation and natural resource management; and
- building capacity of local partners to create mechanisms for continued provision of integrated RH and biodiversity programming after the project's conclusion.

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Potential NGO Cooperators under the Leaders with Associates (LWA) Global Conservation Program (GCP):

African Wildlife Foundation	The Nature Conservancy
Conservation International	Wildlife Conservation Society
Enterprise Works Worldwide	World Wildlife Fund

MEASURE: BUCEN Survey and Census Information, Leadership, and Self-Sufficiency (BUCEN-SCILS)

Cooperating Agency	U.S. Census Bureau (BUCEN)
Project Number	936-3083.04
Agreement Number	HRN-P-00-97-00016-00
Duration	9/97-9/07
Geographic Scope	Worldwide

Purpose: The MEASURE Program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policymaking, managing, monitoring and evaluating population health and nutrition programs. BUCEN-SCILS seeks to strengthen the capability of statistical offices in developing countries to collect, analyze, disseminate and use data to increase understanding of population structure and demographic trends and their implications for development planning and policy making.

Description: This PASA with BUCEN supports:

Country-specific technical assistance to build the capacity of national statistical organizations to implement censuses and other surveys – including technical consultations and training in census design, management procedures, data collection and processing, demographic data analysis, dissemination, and use of census data; *in-country, regional and US-based workshops and study tours* - including training activities to strengthen capacity to design and manage census and survey implementation and to analyze, disseminate and use demographic data; *centrally-coordinated activities that support worldwide efforts to improve collection, analysis and use of census and survey data*, maintenance and dissemination of the International Data Base, a web-based databank containing demographic and socio-economic data for 227 countries and areas of the world.

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MEASURE CDC/DRH

Cooperating Agency	Centers for Disease Control and Prevention (CDC) Division of Reproductive Health (DRH)
Project Number	936-3083.06
Agreement Number	HRN-P-00-97-00014-00
Duration	10/97-9/07
Geographic Scope	Worldwide

Purpose: The MEASURE program is a coordinated effort to improve the collection, analysis and presentation of data for use in planning, policymaking, managing, monitoring and evaluating population, health and nutrition programs. Within this context, MEASURE CDC/DRH seeks to increase understanding of the key family planning/reproductive health (RH) issues, improve the quality and availability of appropriate data on reproductive health status and service, and enhance the ability of local organizations to collect, analyze and disseminate such information.

Description: This PASA with the Division of Reproductive Health at CDC provides technical assistance in survey design and implementation, RH epidemiology, refugee RH and commodity logistics management. CDC provides technical assistance with four types of surveys designed to improve information about health and fertility: Reproductive Health Surveys, Male Reproductive Health Surveys, Young Adult Reproductive Health Surveys, and Reproductive Health Program Impact Evaluation Surveys, each tailored to meet the needs of the country and RH program where it is being conducted. Special modules can be added to answer questions specific to a given country or program such as modules on young adults, domestic violence, children's school attendance, HIV/AIDS, nutrition and voluntary surgical contraception. New survey modules will be developed and used in countries where new areas of concern are mutually identified.

Other new features of the MEASURE CDC/DRH PASA (which is an extension of the PASA previously authorized under DELIVER) include:

- increased effort to bringing survey findings and their programmatic implications to the attention of policymakers and managers responsible for program decisions;
- linking epidemiology training more closely to translating survey and other epidemiological information into programmatic decisions;
- increased emphasis on addressing questions of prevention of unintended pregnancy and HIV/AIDS; and
- epidemiological, behavioral, and organizational research in the area of refugee RH to contribute to efforts to mitigate adverse reproductive health conditions in these particularly vulnerable populations.

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MEASURE *Communication*

Cooperating Agency	Population Reference Bureau (PRB)
Project Number	936-3083.03
Agreement Number	HRN-A-00-98-00001-00
Duration	10/97-9/03
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *Communication* seeks to promote wider dissemination and increased use of information on population, health, and nutrition; and to strengthen capabilities of host-country and regional institutions to communicate results of data analysis and research to key audiences.

Description: MEASURE *Communication* provides information needs assessments, technical assistance and training, and produces materials for program and policy audiences on key issues in population, health, and nutrition. MEASURE *Communication* emphasizes dissemination of results from data collection, analysis, and monitoring and evaluation carried out under the MEASURE Results Package. Data and results from other USAID-supported projects and other sources are also communicated to meet information needs of program managers and policy makers.

Activities include:

- Working with host-country institutions, USAID Missions, media organizations, the private sector, and other CAs to plan and implement dissemination strategies for optimal use;
- Building capacity of host-country institutions to communicate information and research results effectively, through in-country, regional, and global training and technical assistance;
- Assessing information needs and maintaining feedback from global and country-specific audiences to evaluate the relevance and impact of data, research and evaluation findings; and
- Producing and disseminating global and country specific materials (print, electronic, and other formats) and synthesizing results of data analyses, in-depth research, and evaluation.

Subcontractor: Academy for Educational Development (AED).

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MEASURE *DHS*+

Cooperating Agency	ORC Macro
Project Number	936-3083.01
Contract Number	HRN-C-00-97-00019-00
Duration	10/97-9/04
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, MEASURE *DHS*+ seeks to improve information through appropriate data collection, analysis, and evaluation; and to strengthen the data collection and utilization capabilities of host-country institutions.

Description: MEASURE *DHS*+ continues USAID's involvement in global data collection with an increased focus on country data needs and on utilization of data for evaluation and monitoring purposes. MEASURE *DHS*+ emphasizes both qualitative and quantitative data collection methods and includes non-survey data collection approaches such as information systems and service statistics. The project is also more flexible than previous data collection initiatives in terms of content and geographic coverage.

The DHS Core Questionnaire has been modified to include the following information: a five-year monthly calendar of all pregnancies, quality of care, postnatal care, vitamin A intake, sanitation practices, decision making about children's and women's health, and anemia testing for all children and women of reproductive age. The surveys also include an expanded set of questions on HIV/AIDS and STIs. New modules have been added on such topics as malaria, health expenditures, women's empowerment, and domestic violence. MEASURE *DHS*+ also collects information on the service environment through facility surveys that may be organized independently or in conjunction with the main survey.

Other activities of MEASURE *DHS*+ include:

- Developing long-term cost-effective data collection plans;
- Strengthening in-country capacity to collect and utilize data through short-term training activities, on-the-job skills transfer, formal workshops at the country or regional level, providing assistance with formal training courses in host country institutions, and web-based training sessions;
- Assisting countries to efficiently utilize data sources other than national level surveys, such as management and health information systems, censuses, sentinel surveillance, sample registration systems, and international and local databases;

Special Requirements: Unless specifically negotiated with the CTO, though this contract will be in place through 9/04, FY02 was the last year of field support taken. Missions should plan to put FY03 FS into the next DHS contract, to be awarded mid FY03.

Subcontractors: Population Council and The East West Center.

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MEASURE *Evaluation*

Cooperating Agency	Carolina Population Center, University of North Carolina
Project Number	936-3083.02
Agreement Number	HRN-A-00-97-00018-00
Duration	9/97-12/03
Geographic Scope	Worldwide

Purpose: Within the context of MEASURE's coordinated effort to collect data, improve monitoring and evaluation, and disseminate information on population, health and nutrition, *MEASURE Evaluation* seeks to improve monitoring and evaluation coordination/partnerships at international, USAID, cooperating agency and country levels; to strengthen the monitoring and evaluation capabilities in host-country institutions; and to improve monitoring and evaluation tools and methodologies.

Description: The *MEASURE Evaluation* cooperative agreement emphasizes monitoring and evaluation assistance to host-country population, health and nutrition programs as well as to other cooperating agencies, international donors, USAID Missions and USAID/Washington.

Specific activities of *MEASURE Evaluation* include the following:

- Coordinating the development and implementation of comprehensive monitoring and evaluation strategies and plans (including performance monitoring plans) for interested USAID Missions and host-country PHN programs while developing in-country capacity;
- Conducting monitoring and evaluation working groups for indicator and tool development;
- Conducting in-country and U.S.-based training in monitoring and evaluation;
- Supporting qualified candidates for master's degree training in monitoring and evaluation at three regional universities (the University of Costa Rica, Mahidol University in Thailand, and the University of Pretoria in South Africa), and;
- Developing monitoring and evaluation methods that are useful for monitoring program progress on an annual or biannual basis, such as routine health information systems, facility surveys, and qualitative studies.

Subcontractors: John Snow Research and Training Institute; Macro International, Inc.; and Tulane University.

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MEASURE Phase II Demographic and Health Survey Contract

Cooperating Agency	TBD
Project Number	936-3083.07
Agreement Number	TBD
Duration	7/03-7/08
Geographic Scope	Worldwide

Purpose: The MEASURE Phase II DHS Contract is USAID/GH's primary demographic and health data collection effort. It serves as a technical resource to host-country partners, USAID missions, and cooperating agencies as they develop and implement plans to meet their information needs; and collect, analyze, translate, disseminate and use data for planning, policymaking, managing, monitoring and evaluation.

Description: The MEASURE Phase II DHS Contract develops appropriate methodologies and instruments for identifying needed information and for collecting population-based, facility-based and qualitative data. It provides technical assistance to help data collectors collect, analyze, translate, package, archive and disseminate data in forms that meet users' needs. Finally, it helps facilitate the use of data as well as builds capacity of data users and collectors in all of these areas.

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MEASURE Phase II Evaluation Cooperative Agreement

Cooperating Agency	TBD
Project Number	936.3083.08
Agreement Number	TBD
Duration	TBD
Geographic Scope	Worldwide

Purpose: The MEASURE Phase II Cooperative Agreement is USAID/GH's primary vehicle for supporting technical assistance, capacity building, coordination, and research and development in monitoring and evaluation in the PHN Sector. A critical element under this Cooperative Agreement, is the emphasis on the importance of planning for and enhancing data use.

Description: The MEASURE Phase II Cooperative Agreement is designed to: generate demand for high quality M&E information; provide assistance to data users to prioritize data needs; identify research gaps and undertake evaluation research; develop new and refine existing tools, guidelines and approaches for monitoring and evaluating PHN programs; develop capacity among data producers and users in M&E principles, planning, methods and analysis; disseminate M&E tools and best practices; conduct special studies; and facilitate use of M&E data and information

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POLICY II

Cooperating Agency	The Futures Group International
Project Number	936-3078.05
Contract Number	HRN-C-00-00-00006-00
Duration	7/00-7/05
Geographic Scope	Worldwide

Purpose: To help build a supportive policy environment for family planning and reproductive health programs by encouraging policies and plans that promote and sustain access to quality family planning and related health information and services.

Description: POLICY II offers policy assistance for an array of reproductive health issues, particularly family planning, HIV/AIDS, and maternal health. Assistance is available in four areas: **1) Building and Strengthening Political and Popular Support** by providing assistance to identify and strengthen policy champions; form and strengthen NGO coalitions; and expand the participation of NGOs (including youth, gender, and human rights representatives as appropriate) in the policy process. **2) Improving Planning and Financing for FP/RH** to help policymakers design policies and financial mechanisms to increase the level of available resources and to promote the most efficient and sustainable use of those resources to provide family planning and related health services. **3) Providing Information to Inform Policy Decisions** by making information available to support policy decision-making by conducting or commissioning country-specific research to answer key policy questions. It provides user-friendly models (e.g. GOALS, AIM, FamPlan, MTCT) and other tools for data analysis and policy dialogue and helps strengthen local capacity to choose among analysis tools; and **4) Enhancing In-country/Regional Capacity to Carry Out Policy Work** by training and supporting locally-hired long term advisors to promote the policy process in-country. These advisors also provide on-the-job training and support to policy analysts, advocates, and policymakers. The Project also develops new approaches to institutionalize training capacity, e.g., curriculum development at regional universities.

Subcontractors: The Centre for Development and Population Activities (CEDPA) and Research Triangle Institute (RTI).

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Contraceptive Research and Development (CONRAD III)

Cooperating Agency	Eastern Virginia Medical School (EVMS)
Project Number	936-3095
Agreement Number	HRN-A-00-98-00020-00
Duration	8/98-8/08
Geographic Scope	Worldwide

Purpose: To develop new and improved methods of family planning and other reproductive health technologies for use in developing countries, with a particular emphasis on products designed to prevent pregnancy and the transmission of sexually transmitted infections (STI), including HIV/AIDS.

Description: The primary focus of the CONRAD program is on the early stages of research and development, beginning with targeted or applied research studies and progressing to Phase I + II clinical trials. The program supports subprojects conducted by scientists worldwide, as well as laboratory and clinical research conducted at the Department of Obstetrics and Gynecology, EVMS. Areas of research that have been given highest priority for the development of more effective, safer and more acceptable reproductive health technologies include, but are not limited to:

1. Woman-controlled products that offer protection from both unplanned pregnancy and from STI/HIV, including microbicides
2. New barrier methods for women and men; and
3. Long-acting injectable and implantable contraceptives for women and men.

CONRAD III also supports research on the mechanisms and control of heterosexual transmission of HIV, and on the effect of contraceptive use on heterosexual transmission of HIV and other STIs. CONRAD III sponsors international workshops and technical meetings which bring together collaborating scientists and other leading experts to focus research efforts and disseminate technical information.

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Contraceptive Technology Research (CTR)

Cooperating Agency	Family Health International (FHI)
Project Number	936-3079
Agreement Number	CCP-A-00-95-00022-00
Duration	8/95-8/05
Geographic Scope	Worldwide

Purpose: To develop, evaluate, and introduce a range of safe, effective, and acceptable contraceptive methods and reproductive health technologies to enhance the capacity of family planning and reproductive health researchers and programs in developing countries to evaluate and provide these technologies.

Description: The project includes the following activities: 1) developing new contraceptive methods and reproductive health technologies, and providing the documentation for regulatory approval; 2) conducting clinical trials and epidemiologic studies to evaluate the safety and efficacy of various contraceptive methods, as well as other reproductive health technologies, under different conditions; 3) assessing the acceptability and impact on users and programs of various contraceptive methods and reproductive health technologies; 4) carrying out surveillance and testing of contraceptive commodities to ensure product quality; training overseas clinicians in contraceptive and other reproductive health technologies; and collecting, analyzing, and disseminating research findings, and provides technical assistance to programs to utilize state of the art research for service delivery improvement; 5) developing and testing tools and strategies to improve access and quality of family planning services.

Priority areas are: development of new and improved barrier methods and spermicides for pregnancy and HIV-AIDS/STD prevention; improving contraceptive quality; assessing contraceptive benefits and risks; improving access to contraception through reduction of medical barriers; improving cost-effectiveness of programs; and, introducing new or under-utilized methods, such as the IUD and female condom.

This project has documented the comparative safety, efficacy, and acceptability in different developing country settings of methods such as minilap and laparoscopic sterilization, NORPLANT®, copper IUDs, low-dose oral contraceptives, post-partum IUDs, and various barrier contraceptives, including condoms.

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Natural Family Planning & Reproductive Health Awareness (The AWARENESS Project)

Cooperating Agency	Georgetown University/ Institute for Reproductive Health (GU/IRH)
Project Number	936-3088
Agreement Number	HRN-A-00-97-00011-00
Duration	7/97-5/07
Geographic Scope	Worldwide

Purpose: To improve and expand natural family planning (NFP) services, develop new strategies and approaches to increase reproductive health awareness (RHA) in developing countries; and to improve the policy environment of host country PHN programs.

Description: The objective of the NFP/RHA program is to improve and expand natural family planning services and develop new strategies and approaches to increase reproductive health awareness of individuals and communities in developing countries. The NFP/RHA activity will address the needs of people who are using a natural method to avoid pregnancy but lack the information and skills to do so effectively, as well as those who would choose a natural method if it were available to them.

The NFP/RHA program will expand natural family planning services and improve reproductive health through a cooperative agreement with Georgetown University/Institute of Reproductive Health (GU/IRH). NFP/RHA contains the following elements:

- developing simplified natural methods of family planning;
- mainstreaming natural family planning into existing family planning programs, where appropriate;
- increasing reproductive health awareness among communities;
- placing emphasis on the costs and cost-effectiveness of NFP and RHA services; and
- placing emphasis on capacity-building of public- and private-sector institutions to provide natural family planning services and raise reproductive health awareness.

The program is currently introducing a new simple method - the Standard Days Method (SDM), into countries world wide, and testing another method - The Two Day Method (TDM), through clinical trials. The program also focuses on empowering women and men to participate in their own reproductive health care and decision-making through disease prevention; early recognition, self-referral, and treatment of disease; and, active, informed decision-making on their own behalf. Countries interested in expanding choice to include effective natural methods should contact either the IRH or the USAID technical advisor.

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Population Technical Assistance (POPTECH)

Cooperating Agency	LTG Associates, Inc.
Project Number	936-3024.02
Agreement Number	HRN-C-00-00-00007-00
Duration	8/00-8/05
Geographic Scope	Worldwide

Purpose: To provide GH/PRH and USAID field missions with flexible access to the technical expertise needed to develop, monitor and evaluate program activities.

Description: The POPTECH contract continues to provide short-term technical assistance for GH/PRH and USAID field missions. By maintaining a consultant registry database of technical experts, it is able to conduct program reviews, evaluations (programmatic or thematic) and assessments; program designs and strategies; provide specialized technical assistance (including, but not limited to, needs assessments, report writing, TA for special initiatives, etc.); disseminate lessons learned and best practices from a broad range of countries and programs in the PHN sector; and, conduct meetings and workshops both in the U.S. and overseas. Other specialized assistance includes providing TA for refining SOWs and conducting background studies or papers; and the use of consultants for short- to medium-term assignments to help fill staffing shortages in overseas missions. Additional information about POPTECH can be found on their website (www.poptechproject.com), along with various POPTECH reports and the POPTECH Tool Series, developed in collaboration with the MEASURE Evaluation project.

Subcontractor: TvT Global Health and Development Strategies™, a division of Social & Scientific Systems, Inc.

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The Population Council Program III

Cooperating Agency	Population Council
Project Number	936-3097.01
Agreement Number	HRN-A-00-99-00010-00
Duration	8/99-8/04
Geographic Scope	Worldwide

Purpose: The purpose of this activity is to develop, evaluate, and bring to market new and better products for family planning (FP) and for prevention of sexually transmitted HIV/AIDS and other infections (STIs), as well as conduct demographic and social science research that is highly relevant to Agency programs and policy.

Description: Agency-supported research by the Population Council has resulted in the development of several long-acting contraceptive technologies, including IUDs and implants, and continues to improve these technologies as well as developing other approaches such as vaginal rings, reversible methods for male contraception, and microbicides (which may be contraceptive or not) to prevent or reduce sexual transmission of HIV. Overall, these activities aim to expand the array of contraceptive choices for both women and men and to improve reproductive health. This Agreement also supports a research program in Ghana to assess a novel approach to effectively deliver family planning and health care services in rural settings where capacity for service delivery is low. In addition, technical assistance is also provided for research in selected high priority areas, including adolescent reproductive health and demographic studies. Additional information is also available at www.popcouncil.org.

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Reproductive Health Operations Research (FRONTIERS)

Cooperating Agency	Population Council
Project Number	936-3086
Agreement Number	HRN-A-00-98-00012-00
Duration	6/98-6/08
Geographic Scope	Worldwide

Purpose: To contribute to the achievement of the Bureau for Global Health strategic objectives by improving the quality, accessibility, and cost-effectiveness of family planning and other related health services through operations research and technical assistance. FRONTIERS conducts research on issues of both national and global importance. It also builds the capacity of developing country organizations to use operations research as a management tool to diagnose and solve service delivery problems.

Description: Operations research provides the empirical base for making decisions on how best to improve family planning and other reproductive health programs. FRONTIERS is the centerpiece of GH Bureau's FP/RH research portfolio. The cooperative agreement consolidates previous regional work into one global project. FRONTIERS is testing innovative solutions to service delivery problems, assuring dissemination and utilization of results, and building OR capacity. Multi-country studies on issues of global importance, such as serving youth, integration of services, improving quality of care, and financing are a major focus of the program. Other key components include country and regional studies, capacity building, a small grants program, a focus on research utilization, and partnerships with a wide range of cooperating agencies and other organizations.

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ADVANCE Africa

Cooperating Agency	Consortium of six agencies; lead - Management Sciences for Health
Project Number	936-3101.01
Contract Number	HRN-A-00-00-00002-00
Duration	10/00-9/05
Geographic Scope	Africa

Purpose: The ADVANCE Africa activity is a five-year Africa regional competitive award. It is designed to increase the use of sustainable, quality family planning and related health services and healthy practices through clinical and non-clinical programs, with linkages to other sectors, as appropriate.

Description: ADVANCE Africa is expected to scale-up family planning programs through the application of proven approaches and state-of-the-art (SOTA) practices. Priorities include improving quality and access in clinical and non-clinical programs, particularly in the context of high HIV/AIDS prevalence. Possible areas of intervention include FP/RH education, adolescents, counseling and referral through non-clinical channels, women's and community empowerment and public-private and NGO-private commercial partnerships as well as more traditional public sector approaches. Intermediate results to be achieved are as follows:

- Increased access to and improved quality of FP/RH clinical and non-clinical programs;
- Increased capacity for informed FP/RH decision-making by clients and communities;
- Increased capacity of the public and private sectors to sustain quality FP/RH programs.
- Scaled-up and improved FP/RH programs through technical collaboration with other agency/donor foundation programs.

The ADVANCE Africa project is composed of a consortium of six members, Management Sciences for Health (MSH), Academy for Education Development (AED), Family Health International (FHI), The Centre for African Family Studies (CAFS), the Forum for African Women Educationalists (FAWE), and Deloitte Touche Tohmatsu (DTT).

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CARE RH Trust Fund

Cooperating Agency	Cooperative for Assistance and Relief Everywhere (CARE)
Project Number	936.3084.04
Grant Number	HRN-A-00-99-00009-00
Duration	9/99-9/07
Geographic Scope	Worldwide

Purpose: To serve as an endowment for providing sustainable financing for CARE's global family planning/reproductive health/child survival/HIV program.

Description: USAID is faced with the challenge of mobilizing resources for family planning and reproductive health and must find ways to multiply its limited population assistance funds if it is to continue to play its role of global leadership and help respond to an ever-increasing demand for family planning and reproductive health. Because of CARE's worldwide reach and demonstrated capacity to successfully deliver services and leverage previous USAID funds, the Reproductive Health (RH) Trust Fund is an ideal approach for helping USAID achieve its FP/RH goals.

The Trust Fund is designed to expand and sustain CARE's global RH portfolio by:

- ensuring access to quality family planning, maternal health, child survival and STD/HIV services among under-served populations;
- empowering targeted communities to be effective, informed, organized consumers of and advocates for family planning, maternal health, child survival and STD/HIV services; and
- increasing the capacity of national institutions (public, non-governmental, community-based and private, for-profit) to deliver appropriate, high quality, sustainable family planning, maternal health, child survival and STD/HIV services.

The Trust Fund's principal is financed through a combination of USAID funds and CARE match funds. In addition, as a cooperative agreement, the Trust Fund is designed to receive field support from USAID Missions and Regional Bureaus, as well as contributions from other donors (multilateral, bilateral, foundations, private, etc.). This mechanism will allow Missions to allocate funds for mid- and long-term RH planning and to contract technical assistance from CARE. Missions that are phasing out can also use the Trust Fund to keep programs operational after Mission close-out.

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CATALYST Consortium (Family Planning/Reproductive Health Programs)

Cooperating Agency	Consortium of five agencies: Pathfinder International (lead); Academy for Educational Development (AED); Centre for Development and Population Activities (CEDPA); Meridian Group International, Inc; PROFAMILIA/Colombia
Project Number	936-3101.02
Contract Number	HRN-A-00-00-00003-00
Duration	10/00-9/05
Geographic Scope	ANE, E&E, LAC

Purpose: This is a five-year multi-regional competitive award, encompassing Asia and the Near East; Latin America and the Caribbean; and Eastern Europe and Eurasia. It is designed to increase the use of sustainable, quality family planning and related health services and healthy practices through clinical and non-clinical programs, with linkages to other sectors, as appropriate.

Description: CATALYST is designed to disseminate and help scale-up proven models of effective FP/RH programs. As a multi-disciplinary consortium, CATALYST provides technical assistance to identify underutilized channels and strengthen intersectoral partnerships for improved service delivery and information. Possible areas of intervention include: FP/RH education and outreach; adolescent programs; counseling and referral through non-clinical channels; women's and community empowerment; and strengthening public-private and NGO-private commercial partnerships. Anticipated results are as follows:

- Increased access to and improved quality of FP/RH clinical and non-clinical programs;
- Increased capacity for informed FP/RH decision-making by clients and communities;
- Increased capacity of the public and private sectors to sustain quality FP/RH programs.
- Scaled-up and improved FP/RH programs through technical collaboration with other agency/donor foundation programs.

Consortium partners and their key areas of expertise are: Academy for Educational Development (AED) (behavior change, rural outreach, monitoring and evaluation); Centre for Development and Population Activities (CEDPA) (women's empowerment, male involvement, community mobilization, FP/RH links to non-health programs); Meridian Group International, Inc. (commercial sector partnerships, commercial-NGO linkages); Pathfinder International (family planning/reproductive health service delivery, post-abortion care, adolescent programs, coordination with other donors); and PROFAMILIA/Colombia (south-to-south technical assistance, adolescent services and information, NGO financial planning/sustainability).

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Commercial Market Strategies (CMS)

Cooperating Agency	Deloitte Touche Tohmatsu
Project Number	936-3085
Contract Number	HRN-C-00-98-00039-00
Duration	10/98-3/04
Geographic Scope	Worldwide

Purpose: To increase the use of quality family planning and other health products and services through private sector partners and commercial strategies.

Description: The Commercial Market Strategies (CMS) contract will achieve three intermediate results: 1) increased demand from the private sector, 2) increased supply through commercial approaches, and 3) improved environment for sustainable delivery of family planning and other health products and services through the private sector. The project works to expand quality reproductive health care delivery by the private and commercial sector, through innovative health financing programs, social marketing programs, provider networks, partnerships with the commercial sector, corporate social responsibility initiatives and policy change. CMS provides technical assistance to help service delivery NGOs achieve financial sustainability, and is mandated to help move subsidized social marketing programs toward fully commercial partnerships with pharmaceutical companies. CMS also carries out a core research agenda, and through its communications program, disseminates lessons learned about the commercial sector's contribution and potential.

Through the Summa Foundation, an independent foundation managed under CMS, financing and technical assistance are available to NGO and commercial sector clients involved in FP and other health service provision. Summa's micro-credit program also capitalizes loan funds for service providers through local micro-credit organizations.

By the end of the contract, CMS will have: 1) increased the role of the private and commercial sectors in providing family planning and other health products and services; 2) covered under-served, rural and urban areas and populations; 3) improved governments' abilities to rationalize resources and collaborate with the commercial sector; 4) improved knowledge on the use of the private sector to expand health coverage; and, 5) leveraged up to \$50 million from partnerships with the private and commercial sectors.

Implementing Partners: Abt Associates, Inc. and Population Services International (PSI).

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Family Planning Service Delivery Project (Name TBD)

Cooperating Agency	TBD
Project Number	TBD
Agreement Number	TBD
Duration	TBD in 2003-2008
Geographic Scope	Worldwide
Anticipated Award Date	09/03

Purpose: This project will be a five-year, competitively-awarded Leader With Associate (LWA) Cooperative Agreement, with a worldwide scope. It is designed to support and advance the use of quality family planning and related health services, with a focus on facility-based services.

Description: This GH/PRH/SDI agreement is expected to improve and expand family planning service delivery with facility-based services, strengthening the links to other aspects of health care such as community-based services. The emphasis is on family planning technical assistance, but focus on maternal health and HIV/AIDS services can also be provided through this procurement. Priorities include increasing the number of service delivery points that offer an appropriate range of services; promotion of facility-based services among target populations; improving provider support systems; improving provider-client interaction; and improving the policy and advocacy environment for delivery of FP and related health services. The effectiveness of such activities will be measured in part by:

- increased access to quality family planning and related health services
- improving the performance of service providers
- strengthening the environment for family planning and related health service delivery

Implementing Partners: TBD

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Improving the Performance of Primary Providers in Reproductive Health (PRIME II)

Cooperating Agency	INTRAH, University of North Carolina
Project Number	936-3093.01
Agreement Number	HRN-A-00-99-00022-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To improve the performance of primary providers in family planning and reproductive health, including safe motherhood and STD/HIV/AIDS prevention. PRIME II's focus is to develop a sustainable system for training and education that supports on-the-job performance.

Description: PRIME II is a worldwide project focusing on improving the performance of frontline providers in family planning, reproductive health, maternal and child health and HIV/AIDS using both training and non-training interventions (supervision, deployment, organizational development, etc.). Primary providers include nurses, midwives, health attendants, traditional birth attendants, community-based workers and, in some countries, primary care physicians. The objective of PRIME II is to improve on-the-job performance of primary providers and develop a sustainable system (training, education, and service delivery) for improved performance.

PRIME II has regional offices in West Africa (Senegal), East Africa (Kenya), Asia/Near East (Thailand) and Latin America/Caribbean (Dominican Republic).

Subcontractors: Abt Associates Inc.; EngenderHealth; Program for Appropriate Technology in Health (PATH); Training Resources Group (TRG); and implementing institutions include the American College of Nurse-Midwives (ACNM) and Save the Children.

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Management and Leadership Development (M&L)

Cooperating Agency	Management Sciences for Health
Project Number	936-3099
Agreement Number	HRN-A-00-00-00014-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: To improve leadership, management, and sustainability of accessible, quality services and programs in the areas of reproductive health, HIV/AIDS, infectious disease, and maternal and child health by strengthening management systems and increasing leadership capacity; improving the performance of leaders and managers; planning and managing human resources, and building capacity to anticipate and respond effectively to changing external environments.

Description: M&L is designed to reach beyond previous projects to support the development and sustainability of high-performing organizations that provide effective family planning and related health services (e.g., HIV/AIDS, TB, MCH) through:

- Strengthening leadership capacity and building diversity in leadership;
- Improving management systems for key institutions;
- Conducting human resource management (HRM) assessments and providing technical assistance in HRM;
- Enabling leaders and managers to work effectively in the context of health sector reform and decentralization;
- Connecting health managers to sustain performance in countries where USAID assistance has ended;
- Applying a Performance Improvement approach to achieve results and help managers and leaders understand why training alone is often not the answer for complex performance problems;
- Demonstrating which management and leadership interventions are most effective in improving the delivery of services;
- Developing the capacity of local, regional and international organizations to provide south-to-south technical assistance; and
- Communicating advances in management and leadership to the international health field.

M&L provides technical assistance and support to both governmental and non-governmental organizations worldwide. Through partnerships with south-to-south institutions, USAID CAs, private sector initiatives, foundations and donors, M&L demonstrates the most effective and comprehensive ways organizations and individuals can use tools and approaches to build effective systems –thus working toward sustainability. While helping institutions meet client needs and improve the performance of their programs, M&L also increases the body of knowledge of management and leadership and demonstrates why they are critical to improving health services.

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Private Sector Program (PSP)

Cooperating Agency	TBD
Project Number	TBD - 936.3085 xx
Contract Type	IQC (Multiple Awards)
Contract Number	TBD
Duration	TBD, 5 year project
Geographic Scope	Worldwide
Anticipated Award Date	12/03

Purpose: To increase the sustainable provision and use of quality private sector family planning/ reproductive health and other health products and services.

Description: PSP will: (1) Increase consumer demand for FP/RH and other health products and services through the private sector, (2) Increase the supply of quality FP/RH and other health products and services by increasing the capacity of the private sector to deliver services, (3) Improve conditions for private sector involvement in FP/RH and other health products and services delivery. The PSP will utilize commercial strategies and marketing approaches to expand the private provision of family planning, reproductive health, HIV/AIDS, malaria, child survival and other health products and services. It will also assist governments to better target public sector resources to ensure access to quality products and services for the poor, while enhancing the market environment for private sector expansion.

The Office of Population and Reproductive Health anticipates issuing a task order under the PSP to advance the state of the art in private and commercial sector programming, provide technical leadership, conduct monitoring and evaluation of PSP country activities, support partnerships between USAID and the commercial sector, synthesize lessons learned, and serve as a vehicle for mission-funded program implementation. USAID missions may use the PSP for a broad range of country programming related to the private and commercial sectors, including such illustrative activities as expanding networks of private providers, developing mechanisms to assure quality in the private sector, implementing social marketing programs, and entering into public private partnerships to achieve objectives in the PHN sector.

Implementing Partners: TBD

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Program for Voluntary Surgical Contraception and Related Services

Cooperating Agency	EngenderHealth (Formerly AVSC)
Project Number	936-3068
Agreement Number	HRN-A-00-98-00042-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: To increase use of sustainable, client-oriented services in hospital and clinic settings through technical and programmatic assistance in family planning, particularly voluntary sterilization and other long-term methods, post-abortion care, integration of STI/HIV prevention into family planning programs, and in practical quality improvement approaches that address client rights and provider needs.

Description: EngenderHealth works around the world to make safe and voluntary surgical contraception a known and accessible choice, among other family planning choices, for both women and men. EngenderHealth also include making postabortion care a known and accessible service for women suffering from the complications of miscarriage and unsafe abortion. EngenderHealth's Projects emphasize high-quality, client-centered service delivery of female sterilization, vasectomy, other family planning methods and related services such as postabortion care and STI/HIV prevention. EngenderHealth's technical assistance and training programs focus on counseling and informed choice, medical safety, low-tech infection prevention practices, and quality in service delivery from the perspective of the client. EngenderHealth's field and technical staff work in partnership with the country counterparts, USAID missions, other major donors, and other cooperating agencies to establish, expand and improve sustainable clinical contraception and related services.

EngenderHealth provides technical and other assistance to countries and donors in the following areas: conducting needs assessments and planning for clinical contraception service delivery; managing effective client-centered service delivery systems; conducting service-based training; developing service guidelines and quality assurance systems; establishing client counseling and information and education services; introducing contraceptive technologies; integrating STI/HIV prevention into family planning programs; determining medical equipment/supply needs; providing training in postabortion care; doing service-based programmatic research; and evaluating the impact of programs and activities. More recently, EngenderHealth has assisted Missions to ensure compliance with the Tiahrt Amendment requirement of informed choice and recommended specific actions to strengthen the overall level of informed choice within a country.

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Summa Health Fund

Cooperating Agency	Summa Health Fund
Project Number	TBD - 936.3085 xx
Agreement Type	Grant
Agreement Number	TBD
Duration	TBD
Geographic Scope	Worldwide
Anticipated Award Date	07/03

Purpose: To support and increase the viability of private providers that deliver quality family planning, other health products and services through an integrated package of loans and technical assistance.

Description: Summa provides loans and technical assistance to three types of borrowers involved in providing reproductive and primary health care services and products: NGOs, commercial companies and small private providers (through micro-credit programs). Summa also provides business skills and business planning training to private providers and organizations as well as TA in FP/RH. Summa will also explore and develop other innovative financing mechanisms, including loan guarantees, working with USAID's Development Credit Authority (DCA), and expanding private health sector access to local financial institutions. Under the Health Fund grant, Summa will focus on loans and technical assistance to private providers that:

- Build commercial markets through sustainable public-private partnerships
- Expand access to hard to reach population groups, especially the underserved and those in rural areas
- Shift clients from the public to the private sector
- Invest in health infrastructure and delivery mechanisms to improve quality and expand access to family planning and related health services
- Support health care reform and increased access through financing mechanisms
- Improve the sustainability of family planning and related health service provision and product distribution
- Integrate family planning and other health services

Implementing Partners: N/A

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Training in Reproductive Health III

Cooperating Agency	JHPIEGO Corporation
Project Number	936-3069.01
Agreement Number	HRN-A-00-98-00041-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: The purpose of the TRH project is to strengthen the provision of high quality services through improving the performance of RH professionals and providers. The new Training in Reproductive Health (TRH) III Project establishes integrated training systems for family planning and reproductive health by developing, disseminating and implementing national policy and service delivery guidelines; developing a network of trainers to provide expert technical and training support in the pre-service and in-service arenas; and helping ensure management support for the entire training system.

Description: The TRH Project builds on JHPIEGO's expertise in developing cost-effective learning approaches for low-resource settings, including self-paced learning through structured on-the-job training, computer-based training and distance learning, using emerging information technologies. These approaches are designed to meet a broad range of needs- that include support for the management of services (supervision and performance improvement); support for developing the technical skills of clinical trainers as well as support for strengthening the infrastructure that will sustain the systematic transfer of knowledge and skills whether within service delivery entities (NGO's, MOH) or through existing learning institutions (universities and technical schools).

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YouthNet

Cooperating Agency	Family Health International
Project Number	936-3073.01
Agreement Number	GPH-A-00-01-00013-00
Duration	10/01 – 9/06
Geographic Scope	Worldwide

Purpose: to improve the reproductive health (RH) and HIV/AIDS prevention behaviors of young people aged 10-24.

Description: YOUTHNET is a new five-year cooperative agreement within the Bureau for Global Health managed jointly by the Offices of Population and HIV/AIDS. This multi-sector initiative offers a new USAID mechanism to expand and strengthen youth reproductive health and HIV/STI prevention efforts by applying a specialized youth lens and state-of-the-art knowledge in this field. It recognizes that innovative communication and outreach approaches, which go beyond the health sector, are necessary to address young people's particular needs.

YOUTHNET seeks to (1) provide global technical leadership through research, information dissemination, and capacity building to advance the field of youth RH and HIV/STI prevention; (2) partner with USAID missions in about five focus countries to scale-up youth activities for national impact on key youth behaviors; and (3) provide short-term technical assistance in other countries. Key results anticipated for YOUTHNET include:

- an improved policy environment and increased community support for youth reproductive health and HIV/STI prevention;
- improved knowledge, attitudes and skills related to healthy reproductive practices, including strategies to help young people delay sexual activity; and
- when appropriate, expanded access for youth to quality reproductive health products and care.

YOUTHNET has an innovative and comprehensive design to meet the unique, complex and often wide-ranging RH needs of young people as well as those of parents and other involved adults. It recognizes the need to segment all interventions and messages for youth based on their age, sex, life stage, marital status, culture, and geographic location, among other factors. YOUTHNET will take an assets-based approach, emphasizing the energy and resilience of young people and their capacity for positive behavior change, and will seek to involve youth in all aspects of the program. In addition, YOUTHNET proposes to use an innovative social franchising approach to expand networks of youth-friendly services and programs, especially through the private sector.

Partners: CARE USA, Deloitte Touche Tohmatsu Emerging Markets, Ltd. (DTT), Margaret Sanger Center International (MSCI), Research Triangle. YOUTHNET will also involve global youth networks, such as the World Association of Girls Guides and Girl Scouts, the World Organization of the Scout Movement, and the Young Women's Christian Association in addition to global media, including Music Television (MTV) Networks International and SATELLIFE.

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AIDS Social Marketing (AIDSMark)

Cooperating Agency	Population Services International (PSI)
Project Number	936-3090.03
Agreement Number	HRN-A-00-97-00021-00
Duration	9/97-9/07
Geographic Scope	Worldwide

Purpose: The AIDSMark program is designed to implement HIV/AIDS prevention and mitigation social marketing interventions worldwide for USAID, both on a regional and country-specific basis. AIDSMark social markets essential health products and services and also develops and disseminates messages and concepts relating to behavior change.

Description: AIDSMark supports the Bureau for Global Health's (GH) expanded response to the HIV/AIDS pandemic. The AIDSMark contribution consists of (1) targeted and expanded social marketing of condoms for HIV prevention; (2) social marketing of STD prevention information and drug access worldwide; (3) strengthened and expanded public-private partnerships in HIV prevention, infectious disease and other public health interventions; (4) increased availability and marketing of information around safe behaviors to reduce risk of HIV; (5) social marketing of voluntary counseling and testing services; and (6) social marketing of interventions to prevent mother to child transmission of HIV.

Subgrantees: Family Health International (FHI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); International Center for Research on Women (ICRW); and International Planned Parenthood Federation (IPPF); DKT International.

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Call to Action Project

Cooperating Agency	Elizabeth Glaser Pediatric AIDS Foundation (EGPAF)
Project Number	936.3090.16
Agreement Number	GPH-A-00-02-00011-00
Duration	9/02-9/07
Geographic Scope	Worldwide

Purpose: The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) was awarded this cooperative agreement for the design, development, management, monitoring, and technical support to regional and/or country specific programs aimed at preventing mother to child transmission of HIV. The Elizabeth Glaser Pediatric AIDS Foundation initiated the Call to Action Project in September of 1999 to help reduce mother-to-child transmission of HIV in the developing world. This project has already developed a network of over 250 sites in 17 countries.

Description: Working under the HIV/AIDS Bureau for Global Health's Strategic Objective Four, EGPAF and its partner organizations are available to assist Missions and regional Bureaus in implementing programs that result in prevention of mother to child transmission of HIV. The Foundation aims to provide access to health services and treatment to pregnant women, educate health care workers and community members on issues surrounding HIV prevention, transmission and treatment, provide a safe, secure environment to women who might otherwise not seek testing or counseling for fear of social discrimination and persecution, and provide expanded services aimed at ensuring that families stay healthy and communities stay strong.

Subgrantees: Subgrantees are awarded through a competitive RFA process.

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Community REACH

Cooperating Agency	Pact, Inc
Project Number	936-3090.12
Agreement Number	GPH-A-00-01-00007-00
Duration	9/01-9/06
Geographic Scope	Worldwide

Purpose: Under this Leader with Associate cooperative agreement, Community REACH (*Rapid and Effective Action Combating HIV/AIDS*), is designed to: (1) quickly mobilize funding to organizations playing valuable roles in the fight against HIV/AIDS, including U.S. and non-U.S. based PVOs, regional and local NGOs, universities, and faith-based organizations; (2) quickly respond to immediate and longer term Mission and Bureau needs consistent with USAID's goals of "increased use of improved, effective and sustainable responses to reduce HIV transmission and to mitigate the impact of the HIV/AIDS pandemic."

The leader with associate mechanism differs from traditional USAID agreements by virtue of its flexibility. It opens a new avenue for the participation of Missions and Bureaus by allowing them to create additional cooperative agreements or grants known as Associate Awards. Associate awards may be issued until but not after the Leader award expires; they do not have to end concurrently with the Leader award and therefore can extend beyond the Leader.

Description: Community REACH is an umbrella grants making and grants management program supporting HIV/AIDS activities in the following areas: primary prevention and education; voluntary counseling and testing; and care and support for those living with and affected by HIV or AIDS.

Leader (Bureau for Global Health core-funded): To distribute funds, Pact will issue two to three request for applications a year. Each solicitation for sub-grants will vary in terms of the programmatic focus under the three broad areas. The REACH team and GH will work jointly to determine the geographical and programmatic focus of future solicitations with input from Missions.. Grants will be awarded to PVOs and NGOs in amounts starting at \$100,000 for periods of up to three years, depending on funds availability, with unlimited potential for cost sharing from other sources.

Associate (Mission-funded): The Associate awards allow Missions/Bureaus to use the Leader to issue a separate agreement with Pact to more directly support Missions/Bureau-specific HIV/AIDS program needs. The leader with associate authorizes Missions/Bureaus to issue an award directly with Pact without further competition. For example, a Missions/Bureau interested in developing a grant-making program for HIV/AIDS activities can develop an Associate Award with Community REACH to establish a national-level umbrella grant-making program, or to implement a competitive small grants program to local NGOs. Local offices of Pact and FUTURES are not eligible to receive sub-grants under Associate Awards. Under these awards, Missions are expected to completely cover Pact administration costs and fees.

Subcontractors: The Futures Group International

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HIV Operations Research (HORIZONS)

Cooperating Agency	Population Council
Project Number	936-3090.01
Agreement Number	HRN-A-00-97-00012-00
Duration	9/97-7/07
Geographic Scope	Worldwide

Purpose: Under a ten-year Cooperative Agreement from the U.S. Agency for International Development, the Population Council and its U.S.-based and international partner organizations will conduct operations research to develop and identify best practices for the prevention of HIV/AIDS and other sexually transmitted diseases.

Description: HORIZONS will feature practical, field-based, program-oriented operations research. The overall research outcome will be the identification of “best practices” for: 1) reducing the risk of acquiring HIV; 2) preventing and managing sexually transmitted infections; 3) implementing strategies for policy analysis and advocacy; 4) providing effective and efficient care and support services for persons infected with or directly affected by HIV/AIDS; 5) ensuring effective community participation; and 6) expanding and enhancing the integration of STI/HIV services into existing maternal and child health, and family planning programs.

Subgrantees: Program for Appropriate Technology in Health (PATH); International Center for Research on Women (ICRW); International HIV/AIDS Alliance; the University of Alabama at Birmingham; and Tulane University.

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Implementing AIDS Prevention and Control Activities (IMPACT)

Cooperating Agency	Family Health International (FHI)
Project Number	936-3090.02
Agreement Number	HRN-A-00-97-00017-00
Duration	9/97-9/07
Geographic Scope	Worldwide

Purpose: Family Health International was awarded this cooperative agreement for the design, development, management, monitoring and technical support to regional and/or country specific HIV/AIDS program interventions. This project builds on over fifteen years of experience by the FHI team in program design, management and evaluation of HIV/AIDS programs in developing countries.

Description: Working under the Bureau for Global Health's Strategic Objective Four, FHI and its partner organizations are available to assist Missions and regional Bureaus in implementing programs that result in reduced sexual risk of HIV acquisition, improved sexually transmitted infection prevention and management, preventing mother to child transmission, minimizing contextual and policy constraints, promoting comprehensive care and support programs, increased effective linkages between prevention and care, and improved program monitoring and evaluation.

Subgrantees: Population Services International (PSI); Program for Appropriate Technology in Health (PATH); Management Sciences for Health (MSH); Institute of Tropical Medicine (ITM); and University of North Carolina (UNC).

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International AIDS Vaccine Initiative

Cooperating Agency	International AIDS Vaccine Initiative (IAVI)
Project Number	936-3090.11
Agreement Number	GPH-G-00-01-00004-00
Duration	09/01-09/03
Geographic Scope	Worldwide

Purpose: With prevention efforts as the cornerstone of USAID's HIV/AIDS strategy, it is most logical that USAID be associated with the development of the world's best and only long-term prevention solution for ending this global epidemic. Under this grant, the International AIDS Vaccine Initiative (IAVI) ensures the development of safe, effective, accessible, preventive AIDS vaccines for use throughout the world.

Description: The simultaneous testing of a wide variety of different vaccine approaches will yield the fastest path to safe and effective AIDS vaccines. IAVI's scientific program seeks to maximize the number of promising vaccine candidates in human clinical trials, focusing on vaccines that can be most useful in developing countries. IAVI's strategy calls for taking direct scientific leadership by financing and managing international vaccine development projects while raising awareness and encouraging governments, the pharmaceutical industry and philanthropists to deepen their commitment to this global challenge. IAVI believes in involving and empowering developing country scientists, policy makers, and community members and ensuring that they have the skills and knowledge to be full partners in the effort. IAVI is also actively engaged in policy and advocacy efforts to build political and financial support for AIDS vaccines and encourage the global community and national governments to establish practical and effective public policies for accelerating AIDS vaccine development and testing, and to ensure that once a vaccine is developed it is widely accessible in as short a time as possible.

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International HIV/AIDS Alliance

Cooperating Agency	International HIV/AIDS Alliance
Project Number	936-3090.07
Grant Number	HRN-G-00-98-00010-00
Duration	1/98-09/07
Geographic Scope	Worldwide

Purpose: Under this grant, the International HIV/AIDS Alliance will continue to mobilize indigenous NGOs and community based organizations to respond to AIDS; improve the quality of their work; build capacity of local service organizations and technical support providers, and; document and share lessons about community mobilization and NGO capacity building.

Description: The Alliance will continue its already successful work in promoting the integration of HIV and STD work into other community development initiatives, linking prevention and care, and promoting partnerships among local NGOs and between NGOs and government services. The Alliance's national or sub-national level capacity building emphasizes the development of sustainable local NGO support organizations with functions including local and international resource mobilization, technical support in local languages, monitoring, evaluation and NGO sector policy leadership. The Alliance may be particularly useful to Missions and regional Bureaus that wish to mobilize and strengthen community responses in countries on the frontiers of the HIV epidemic, where there is not yet strong local capacity; to involve local health and development NGOs that are not yet responding to AIDS; to ensure coordination with other major bilateral and multilateral donors; to organize South-South technical support, to build a sustainable locally governed infrastructure to mobilize and support NGOs in an ongoing manner.

The International HIV/AIDS Alliance has partner offices in Senegal, Burkina Faso, Philippines, Sri Lanka, India, Bangladesh, Cambodia, Ecuador, Zambia, Mexico, and Morocco. Please contact their Brighton, England Headquarters for details and contact information.

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Joint United Nations Programme on HIV/AIDS (UNAIDS)

Cooperating Agency	Joint United Nations Programme on HIV/AIDS (UNAIDS)
Project Number	936-3090.08
Grant Number	AAG-G-00-97-00006-00
Duration	9/97-9/03
Geographic Scope	Worldwide

Purpose: To support UNAIDS to perform its role as the leading advocate for worldwide action against HIV/AIDS and to achieve its global mission which is to lead, strengthen and support an expanded response to the epidemic that will:

- prevent the spread of HIV
- provide care and support for those infected and affected by the disease
- reduce the vulnerability of individuals and communities to HIV/AIDS
- alleviate the socioeconomic and human impact of the epidemic.

Description: Since 1986, USAID has been an active partner with the United Nations in the response to the global AIDS pandemic. In January 1996, the joint United Nations Program on HIV/AIDS (UNAIDS) was launched. UNAIDS brings together the efforts and resources of a Geneva-based Secretariat and eight UN organizations to help the world prevent new HIV infections, care for those already infected, and mitigate the impact of the epidemic. UNAIDS is governed by a Programme Coordinating Board (PCB) that consists of representatives from 22 countries (including the U.S.), the eight cosponsors, and five nongovernmental organizations. UNAIDS performs the following five cross-cutting functions within strategic parameters described in the UN System Strategic Plan for HIV/AIDS, the Global Strategy Framework on HIV/AIDS, and the Declaration of Commitment adopted by the UN General Assembly Special Session on HIV/AIDS in June 2001 (all available on UNAIDS' website):

- leadership and advocacy for effective action on the epidemic;
- strategic information required to guide the efforts of partners;
- tracking, monitoring and evaluation of the epidemic and actions responding to it;
- civil society engagement and partnership development; and
- financial, technical and political resource mobilization.

In September 1997, USAID awarded a Public International Organizations grant to UNAIDS. The grant ends September 30, 2003. As of this writing (Feb. 2003) discussions are underway regarding a new grant. The grant's "Program Description" is UNAIDS' Unified Budget and Workplan, prepared on a biennial basis. To promote complementarity between UNAIDS' activities and those of USAID, USAID participates on the US delegation to the UNAIDS board, USAID can "attribute" up to 10 percent of the grant to mutually-agreed activities within the Unified Budget and Workplan, and UNAIDS participates in USAID's interagency working group that coordinates the plans and activities of USAID-funded partners working together to achieve the Agency's HIV/AIDS strategic objective.

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Local Voices

Cooperating Agency	Internews Network, Inc.
Project Number	936-3090.14
Grant Number	GPH-A-00-02-0007-00
Duration	09/02 - 09/04
Geographic Scope	Worldwide

Purpose: Internews was awarded this cooperative agreement to create a more supportive social environment for preventing and mitigating the impacts of HIV/AIDS, through an enlightened and committed local broadcast community.

Description: The Local Voices project will begin by establishing an HIV/AIDS media resource center in each country that will house audio, video and print resources on the pandemic, as well as a digital radio production studio. Internews will invite local stations to use the facilities for production of new items, public service announcements, investigative reporting and in-depth features on HIV/AIDS, its treatment and prevention.

Subgrantees: Journalists Against AIDS in Nigeria (JAAIDS)

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The Synergy Project

Cooperating Agency	TvT Global Health and Development a division of Social and Scientific Systems, Inc.
Project Number	936-3090.04
Contract Number	HRN-C-00-99-00005-00
Duration	4/99-4/04
Geographic Scope	Worldwide

Purpose: This project provides technical assistance to design and refine HIV/AIDS strategic objectives and results frameworks; monitor the processes, outcomes and impact of HIV/AIDS prevention and/or mitigation activities; and collect and disseminate research, implementation, and evaluation findings.

Description: Synergy provides the following services:

Design: informed technical assistance to the field (Missions and Regional Bureaus) for the design of national HIV/AIDS prevention and mitigation strategies, and Strategic Results Frameworks. The focus of the design activities will be at the SO, IR and sub-IR levels, including development of indicators, targets and gross budgets.

Monitoring: technical assistance to the field to design M&E systems, and development of an HIV/AIDS programmatic and financial database to include Mission, Regional Bureau and Global Bureau programs.

Evaluation: technical assistance to the field to conduct project evaluations of programs.

Lessons Learned: Identification of lessons learned from USAID's global, regional, and bilateral projects to inform future design and monitoring efforts.

Dissemination: Collection and dissemination of HIV/AIDS information.

Synergy also serves as the major support mechanism and resource for other USAID Office of HIV-AIDS activities: Secretariat for the Implementation Working Group (IWG), HIV/AIDS project database, technical updates to the field, HIV/AIDS consultant database and HIV/AIDS reference library.

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U.S. Census Bureau

Cooperating Agency	U.S. Census Bureau (BUCEN)
Project Number	936-3090.05
Agreement Number	HRN-P-00-98-00002-00
Duration	1/98-9/07
Geographic Scope	Worldwide

Purpose: To maintain the HIV/AIDS Surveillance Data Base; provide demographic and economic models of the impact of the HIV and AIDS in urban and rural areas of the developing world and; disseminate information through a variety of publications and presentations throughout the world.

Description: In fiscal year 1998, GH entered into an agreement with the U.S. Census Bureau (BUCEN) for HIV/AIDS data information transfer, demographic modeling and human resources which were - and continue to be - integral to USAID's work in HIV/AIDS. BUCEN contributed to the USAID program with support to monitor the spread of HIV and to understand the potential effect the AIDS pandemic will have on development. The technical assistance from BUCEN for this work has required experience in epidemiological data base projections and population projection modeling. With its worldwide reputation for excellence, the International Programs Center represents the preeminent U.S. source for technical expertise in this area.

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U.S. Peace Corps

Cooperating Agency	U.S. Peace Corps
Project Number	936-3090.06
Agreement Number	AAG-P-00-97-00008-00
Duration	9/97-7/07
Geographic Scope	Worldwide

Purpose: Under this agreement, the Peace Corps will continue to promote and expand its community based efforts in HIV/AIDS prevention and care.

Description: There are currently 7,000 Peace Corps volunteers working in over 90 countries around the world. The Interagency Agreement funds will assist with NGO and CBO development; integrated community health approaches to HIV/AIDS prevention and care; programs for women and girls; and programs for youth, both in and out of school. The funds from the agreement will provide technical assistance to Peace Corps volunteers, field staff, host country officials and counterparts, NGOs and PVOs through training, project design and evaluation assistance, materials development, and dissemination of results.

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Data for Decision Making II: Population, Health and Nutrition Information (PHNI)

Cooperating Agency	Jorge Scientific Corporation
Project Number	936-3098.01
Contract Number	HRN-C-00-00-00004
Duration	4/00-4/05
Geographic Scope	Worldwide

Purpose: To provide population, health and nutrition technical teams in USAID, other agencies and developing countries with essential information on program needs, technologies, costs, and impacts to support accurate priority-setting, design, management, and evaluation of country programs.

Description: PHNI has technical expertise in three interrelated areas: information technology (IT), technical analysis, and communication.

The IT Unit provides comprehensive, state-of-the-art IT solutions through supporting and developing IT systems that are easy to use and understand. The primary foci are on providing applications, databases, and web-based development, while also providing support services that include network administration, hardware support, website hosting, software training, and data administration. Through the IT unit, GH staff will have ready access to critical information that is needed to plan and carry out programmatic mandates.

The Analysis Unit provides assistance to GH technical staff in analyzing and presenting secondary data from a variety of sources such as DHS, WHO, UNICEF, in all of the GH objective areas, including population, child survival, nutrition, HIV/AIDS, and infectious diseases. Additionally, data on indicators and financial trends are maintained to support USAID in reviewing program impacts and monitoring performance. PHNI analysts carefully review data to ensure quality, ensure data are current, and provide further support to GH through technical and analytical reporting, including annual reports to Congress.

Using the information available through the IT and Analysis Units, and elsewhere, the Communications Unit will support USAID by effectively communicating GH issues to various target audiences through the strategic development and production of materials for broad distribution. The Communication Unit can help GH staff to design communication approaches and reach defined audiences - including Congress, other primary constituencies, and the general public - through various channels and materials including reports, multimedia presentation, briefings, pictorial display, conferences (e.g., APHA), and community outreach.

Subcontractors: The Futures Group International (FUTURES) of Washington, D.C. and John Snow, Inc. (JSI) of Boston, MA.

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Global Health Council

Cooperating Agency	Global Health Council
Project Number	936-3098.02
Agreement Number	HRN-A-00-99-00018-00
Duration	8/99-8/04
Geographic Scope	Worldwide

Purpose: The Global Health Council, formerly the National Council for International Health, is the primary information and outreach group providing broad representation for all international health issues of greatest importance to USAID. The purpose of this cooperative agreement is to support the overall objectives of the Global Health Council with specific support for information and capacity-building activities.

Description: The Council's key areas of institutional focus are to inform and educate the American public, practitioners, and political and technical decision makers engaged in delivering health and population programs around the world, and to serve as a leading forum for the exchange of information on best practices and access to technical training assistance and information.

During this five-year cooperative agreement, USAID will support the Council's efforts in organizing and completing the following activities:

- Local - global health forums
- Special events
- Congressional educational/technical briefings
- Regional forums
- Technical workshops
- The Annual International Health Conference

In addition, the Council will establish:

- A global health database
- A pilot Global Health Council affiliate

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Partners for Health Reform *plus* (PHR*plus*)

Cooperating Agency	Abt Associates, Inc.
Project Number	936-3104.01
Contract Number	HRN-C-00-00019-00
Duration	10/00-09/05
Geographic Scope	Worldwide

Purpose: To improve the design and implementation of health policy and systems innovations so that they contribute to improved health system performance in delivering PHN priority interventions; to improve global understanding of the elements of health policy and systems development that foster improved performance in delivering PHN priority interventions.

Description: The project is the principal USAID technical service resource in health policy and systems strengthening. PHR*plus* focuses on themes such as promoting priority services through health systems strengthening, community based health financing, national health accounts, global alliances, decentralization and management strengthening, and combating corruption through accountability. As the flagship project in this field, PHR*plus* provides technical assistance in health system organization, health financing, health information (including National Health Accounts), and disease surveillance. PHR*plus* also provides limited technical assistance in health worker service quality and commodities. Technical assistance focuses on developing strategies, increasing stakeholder participation, building consensus, undertaking feasibility studies, developing and carrying out implementation plans, training, capacity building, monitoring and evaluation, research and information dissemination.

Subcontractors: University Research Corporation (URC), Program for Appropriate Technology in Health (PATH), Emory University Rollins School of Public Health, Tulane University School of Public Health and Tropical Medicine, Development Associates (DA), Social Sectors Development Strategies (SSDS), SAG Corporation, Training Resources Group (TRG) and Philoxenia International Travel.

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Quality Assurance and Workforce Development (QAWD)

Cooperating Agency	University Research Company, LLC
Project Number	936-3104.05
Contract Number	GPH-C-00-02-00004-00
Duration	4/02-4/08
Geographic Scope	Worldwide

Purpose: To improve the capacity of health programs to achieve higher levels of quality and efficiency. Like the earlier Quality Assurance II, the QAWD Project adapts a wide range of approaches from the field of modern quality assurance (QA) for use in developing and middle income countries. The project also addresses issues related to the management of human resources that have an impact on quality of care.

Description: Most USAID priority services such as child health, essential obstetrical care, malaria and tuberculosis case management, HIV/AIDS-related care, and reproductive health, involve provider compliance with evidence-based guidelines. Training is a necessary but insufficient strategy for promoting high levels of compliance. Further, health systems generally have not developed effective administrative mechanisms to support services that follow such guidelines. To address these issues, the project offers specialized expertise in seven major QA strategies:

- Development of more effective guidelines, addressing feasibility and provider acceptance, as well as evidence
- Systems for monitoring quality of care, as an integral part of service delivery
- Strategies for directly promoting compliance with guidelines, including QA approaches to strengthen traditional training and supervision, and other strategies to complement these systems
- Problem solving, including the quality improvement methodology used in US medical centers, and a range of simpler generic problem solving techniques
- Re-design of health services, a systematic approach to assure that administrative procedures support rather than hinder the quality and efficiency of care
- Promoting quality in the private sector, adapting well-established strategies from developed countries, such as certification of specialty training, accreditation of facilities and training programs, licensing, and insurance reimbursement
- Expanding the evidence base for human resources management, to provide a stronger argument for improving practices in this critical but politically sensitive element of health systems.

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Rational Pharmaceutical Management Plus (RPM Plus)

Cooperating Agency	Management Sciences for Health (MSH)
Project Number	936-3104.02
Agreement Number	HRN-A-00-00-00016-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: To improve the availability of health commodities (pharmaceuticals, vaccines, supplies and equipment) of assured quality for PHN priority interventions, and promote their appropriate use in both the public and private sectors. As the primary G/PHN mechanism for commodity management systems strengthening, the RPM Plus mandate is to provide technical leadership to global initiatives such as Stop TB and Roll Back Malaria; develop and apply new, specialized tools as required to generate needed commodity-related information and improve decision making processes; actively foster operational donor coordination and strategic planning globally and at the country level to improve product availability; monitor and assess the impact of reform initiatives on access to and availability and use of essential health commodities for PHN priority interventions; and identify lessons-learned, formulate guiding principals and disseminate best practices and approaches in commodity management under health sector reform.

Description: RPM Plus will introduce sustainable reforms in commodity management systems and improve the availability and use of health commodities by:

- Employing state of the art diagnostic assessment methods to determine the root causes and factors contributing to poor availability and irrational use of commodities;
- Reducing financial waste and maximizing the allocation and use of existing resources;
- Promoting appropriate government policies and regulations to help assure product quality;
- Increasing overall commodity management capacity regionally, and at the national, decentralized or integrated levels of health care systems;
- Designing national strategies and intervention packages to slow the emergence and spread of antimicrobial resistance;
- sourcing or privatization of selected drug management functions (e.g., warehousing, distribution);
- Addressing the commodity management issues of HIV/AIDS and Infectious Diseases (malaria and TB) programs and the implementation problems involved in scaling-up;
- Enhancing financing mechanisms (e.g., pharmacy benefits management, revolving drug funds) and leveraging resources from foundations and donors for commodities;
- Improving commodity selection and quantification for PHN priority interventions;
- Promoting transparent, accountable and efficient procurement policies and practices; and
- Improving drug use practices on both the demand (e.g., patient drug seeking behavior) and supply sides (e.g., providers and dispensers), including drug sellers and commercial sales.

Subrecipients: Academy for Educational Development (AED), Alliance for the Prudent Use of Antibiotics (APUA), Boston University, Harvard University, Health and Development Service (HANDS), Program for Appropriate Technology in Health (PATH), and University of Newcastle.

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U.S. Pharmacopeia Drug Quality and Information (USPDQI)

Cooperating Agency	United States Pharmacopeia
Project Number	936-3104.03
Agreement Number	HRN-A-00-00-00017-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: USPDQI contributes to effective drug and commodity regulatory approaches and policies; enhanced methods for drug quality assurance; increased access to unbiased drug and therapeutics information; and improved prescribing, dispensing, and patient compliance with treatment regimens.

Description: USPDQI can improve drug quality assurance and promote the appropriate use of medicines by:

- Developing drug and therapeutics information to support PHN Strategic Objectives. Under the previous RPM program, USP developed information packages on polio, OPV and misconceptions about immunizations, antimicrobial resistance, *misoprostol* for postpartum hemorrhage, and fixed-dose combination drugs for malaria prevention and treatment;
- Introducing the use of authoritative standards for drug quality, strength, purity and packaging and appropriate testing methods to detect counterfeit and sub-standard products;
- Assessing and upgrading quality control laboratories, including staff training as required;
- Conducting technical reviews of the quality of pharmaceutical information sources;
- Building local capacity to develop and disseminate locally relevant drug and therapeutics information and to establish national and regional drug information networks;
- Developing drug information tailored to suit local conditions and meet the needs of target audiences (e.g., patients and consumers, regulators, health care professionals, NGOs);
- Improving dispensing practices of private sector drug retailers and supporting the establishment of minimal criteria for accreditation and licensing;
- Contributing to medical textbooks, continuing education, distance-learning packages and technical update training (e.g., to improve prescribing of antimicrobial agents); and
- Supporting drug policy development and strengthening regulatory authorities, through workshops, provision of information on drugs for Essential Drugs Lists and formularies and technical assistance by USP expert committees and the FDA.

USP standards of drug strength, quality, purity, packaging and labeling have been recognized by the U.S. Congress since 1848 and are enforceable by the U.S. Food and Drug Administration (FDA). USP drug information on indications, precautions, interactions and side effects is widely recognized as an authoritative, up-to-date, and unbiased source of information for health care professionals and patients.

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WHO Strengthening of Health Services (SHS)

Cooperating Agency	World Health Organization (WHO)
Project Number	936-5994.07
Grant Number	AAG-G-00-98-00008
Duration	09/98-09/04
Geographic Scope	Worldwide

Purpose: To support the design, implementation, and management of health sector reforms in developing countries by supporting analyses of the generation, allocation, and management of financial resources for health.

Description: This grant supports policy-relevant information by focusing on four key strategies: 1) policy analysis; 2) information support and dissemination; 3) training support; and 4) advocacy and coordination with other units within WHO and with other multi-lateral and bilateral agencies. It is expected that the outcomes of the program will encourage countries to include economic considerations in their national health sector reforms and will improve resource use by health managers.

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Africa Program for Onchocerciasis Control (APOC)

Cooperating Agency	World Bank
Project Number	936-3100.09
Grant Number	GHA-G-00-02-00004
Duration	9/02-9/07
Geographic Scope	Africa Region

Purpose: The Onchocerciasis Control Program was authorized on September 17, 1992, to provide the U.S. financial contribution to the World Bank Onchocerciasis Trust Fund for the West Africa Onchocerciasis Control Programme (OCP); and amended in 1996 to allow contributions to the Fund to be used to support the newly formed Africa Programme for Onchocerciasis Control (APOC), a 16 country program to extend onchocerciasis control to oncho-endemic countries not covered by the West African Onchocerciasis Control Program (OCP).

Description: USAID's onchocerciasis project is expected to achieve the following kinds of results:

- transfer to national programs within the OCP the capacity for continued delivery of ivermectin through community-based approaches by 2002;
- strengthening the epidemiological evaluation and surveillance capacity of OCP member states to detect and control recrudescence, and where needed maintaining effective vector control operations;
- elimination of onchocerciasis-related blindness from the approximately 16 APOC African countries where the diseases is still a major public health problem;
- building sustainable community-based systems capable of annual delivery of ivermectin.
- establishment of effective collaborations between non-governmental organizations and national ministries of health in the planning and implementation of local ivermectin delivery programs.

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Environmental Health Project (EHP II)

Cooperating Agency	Camp, Dresser & McKee International
Project Number	936-5994.10
IQC Number	HRN-I-00-99-00011-00
Duration	6/99-6/04
Geographic Scope	Worldwide

Purpose: To reduce environmentally-related mortality and morbidity in both urban and rural settings.

Description: The Environmental Health Project (EHP) has two objectives. The principal objective is to reduce mortality and morbidity in children under five or associated with infectious diseases of major public health importance, by improving environmental conditions or reducing exposure to disease agents. The second is to provide diverse interests within USAID with access to a broad range of expertise in environmental health. EHP is implemented through an IQC awarded in June 1999. An initial Task Order with a \$33M ceiling was simultaneously awarded with the contract to support activities in community-based environmental health related to child survival (including sanitation, water supply, hygiene, indoor air pollution, and vector control) and for activities which relate environmental changes to vector-borne infectious disease outcomes (including surveillance and mapping of health, entomological, and other variables leading to improved malaria prevention and control programs). Missions and Bureaus can request assistance under Task Order #1 to achieve results consistent with this scope of work. Other services can be obtained through separate task orders to the IQC.

Subcontractors: Associates in Rural Development (ARD); International Science and Technology Institute (ISTI); John Snow, Inc. (JSI); The Manoff Group; Research Triangle Institute (RTI); Training Resources Group (TRG); and Tulane University School of Public Health.

Note: Field Support funds can be directed to task order #1 for activities consistent with the scope of work of this task order.

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Infectious Diseases Results Package: Centers for Disease Control and Prevention IAA

Cooperating Agency	Centers for Disease Control and Prevention (CDC)
Project Number	936-3100.01
Agreement Number	AAG-P-00-99-00006-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To strengthen the delivery of infectious disease and other health programs in developing countries by accessing technical expertise from the Centers for Disease Control and Prevention and collaborating with the CDC to address infectious disease and other health problems in the developing world.

Description: The umbrella interagency agreement with CDC allows USAID to access technical expertise from CDC and is a world-renowned source of specialized technical experience and expertise in the international health field. The IAA supports activities in control and prevention of infectious diseases including tuberculosis, malaria, disease surveillance and antimicrobial resistance; HIV/AIDS; and environmental health.

Specific workplans are developed with appropriate centers or divisions within CDC and activities take the form of linked series of consultancies or long term technical assistance. Activities include:

1. Technical and program support for the development and implementation of appropriate global/regional/country-level health programs and strategies;
2. Monitoring and evaluation of global/regional/country-level health activities, projects and programs; and
3. Studies, assessments, evaluation and other research activities to assist in policy dialogue, planning and formulating health programs.

Missions can access the IAA through field support for either short or long term technical assistance.

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Infectious Diseases Results Package: NIH/Fogarty Center - Tuberculosis Research and Training

Cooperating Agency	National Institutes of Health (NIH)
Project Number	936-3100.03
Agreement Number	AAG-P-00-99-00004-00
Duration	9/99-9/08
Geographic Scope	Worldwide

The National Institutes of Health (NIH) Fogarty International Center (FIC) fosters collaborative research partnerships between U.S. scientists and foreign counterparts through fellowships and exchange awards and international agreements, to meet new and emerging global health challenges and human resource needs. Specifically, this IAA with FIC will contribute to strengthening developing country global health research and public health capacity in the areas of tuberculosis (TB) and HIV/AIDS. This capacity is critical to the ability of these countries to respond to the threat posed by TB and HIV/AIDS.

Global health research and public health capacity will be strengthened in countries where TB, HIV/AIDS or both are significant problems through two FIC programs: 1) the Tuberculosis International Training and Research Program (TBITRP) and 2) the International Clinical, Operational, and Health Services Research Training Award for AIDS and Tuberculosis (ICOHRTA-AIDS/TB).

The FIC TBITRP is designed to:

- provide collaborative training of future public health and research world leaders at U.S. institutions;
- increase TB control and prevention research collaboration and capacities in developing countries through targeted, in-country, training;
- expand on-going collaborative research in TB control and prevention between U.S. and developing country scientists; and
- establish or strengthen TB model research, treatment, and control centers in countries of FIC trainees.

The FIC ICOHRTA-AIDS/TB Program is designed to:

- strengthen capacity to carry out collaborative and integrated clinical, operational, and health services research related to the prevention, treatment and care of HIV/AIDS or TB in developing country sites where HIV/AIDS, TB or both are significant problems.

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Infectious Diseases Results Package: World Health Organization Umbrella Grant

Cooperating Agency	World Health Organization (WHO)
Project Number	936-3100.02
Grant Number	AAG-G-00-99-00005-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: This grant provides support to the World Health Organization to carry out collaborative activities with USAID in infectious diseases, maternal and child health and HIV/AIDS.

Description: The umbrella grant to WHO consolidates most of the Office of Health and Nutrition's agreements with WHO under a simplified mechanism. The grant supports broad USAID-WHO collaborations in tuberculosis, malaria and other vector borne diseases (e.g., dengue), disease surveillance, research, antimicrobial resistance, maternal and child health, and HIV/AIDS -- at WHO headquarters in Geneva as well as at regional and country offices.

Specifically, support is provided to WHO's relevant technical and program divisions for technical input and assistance in the development, implementation and/or evaluation of health programs and studies including:

- global strategy development;
- technical analyses;
- demonstration activities and feasibility studies;
- capacity building;
- policy reform;
- project evaluation and assessments;
- monitoring and evaluation;
- workshops and conferences;
- education/information strategies;
- maternal and neonatal health

Missions can access WHO technical expertise via field support.

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Malaria Action Coalition (MAC)

Cooperating Agencies	The World Health Organization (WHO) Centers for Disease Control and Prevention (CDC) Rational Pharmaceutical Management Plus (RPMPlus) Maternal and Neonatal Health (MNH)
Project Number	936-3112
Duration	FY02-FY06
Geographic Scope	Africa-wide

Purpose: The Malaria Action Coalition (MAC) brings together several of USAID's existing and potential partners in a coordinated effort to address key issues in the fight against malaria. The goal of the MAC is to directly contribute to reductions in malaria-related mortality and morbidity due to treatment failure and placental infection across Africa. The MAC is intended to provide the benefits of coordinated effort of these partners in technical support to USAID mission and regional programs. The MAC provides immediate and focused action to assist countries to review existing treatment practices and promote policies consistent with provision of effective therapy and safer pregnancies.

Description: The Malaria Action Coalition creates a mechanism to allow USAID flexible and effective action around two key issues for malaria control in Africa: provision of effective treatment of acute illness and placental infection. Field support through the Malaria Action Coalition activates a process of consultation among mission, Global Health and MAC partners to define and execute context and country-specific workplans. The coordinated actions of the four MAC partners, guided and approved by the USAID CTOs of these existing mechanisms and the programmatic direction set by missions, offers USAID missions and regional programs access to this joined expertise and coordinated action, and Global Health assistance in this access. The MAC focuses on not only policy but also the development of necessary national tools and strategies for implementation (procurement practices, training protocols, communications) and links to on-going programs supported by MOH, bilaterals (including USAID) and other partners to ensure successful scale-up of interventions.

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Malaria Vaccine Development Program (MVDP)

Cooperating Agency	Various
Project Number	936-6001
Contract Number	Various
Duration	5/92-4/02
Geographic Scope	Worldwide

Purpose: To develop vaccines that will reduce malaria-associated mortality and morbidity in developing countries, especially in children.

Description: The MVDP focuses on addressing the major rate limiting step in malaria vaccine development: the translation of promising laboratory findings into vaccines that can be evaluated in humans. To accomplish this, the program supports the:

- scaled-up production of laboratory constructs;
- manufacture of pilot lots of vaccines for evaluation in humans;
- conduct of preclinical studies;
- application to the Food and Drug Administration for approval to conduct clinical trials;
- conduct of clinical trials; and
- conduct of field trials.

These capabilities are available to the MVDP through agreements with other domestic agencies (National Institutes of Health, Centers for Disease Control and Prevention, and the Department of Defense) and international groups involved in the development of malaria vaccines (Commission of European Communities and the World Health Organization Special Programme for Research and Training in Tropical Disease Research).

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NetMark Plus

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-5994.09
Agreement Number	HRN-A-00-99-00016-00
Duration	9/99-9/07
Geographic Scope	Africa Region

Purpose: NetMark Plus represents the cutting edge in public/private partnerships for prevention of malaria. Funded by the US Agency for International Development (USAID) and implemented by the Academy for Educational Development (AED), NetMark Plus is an eight year (September 1999 through September 2007), \$65.4 million dollar project designed to reduce the impact of malaria in sub-Saharan Africa through the increased use and sustainable supply of insecticide treated mosquito nets (ITNs), and insecticide treatment kits for nets, through partnership and joint investment with a wide range of international and local commercial partners.

Description: AED's core partners on NetMark include the Malaria Consortium (UK), Group Africa, and FCB Advertising. Commercial partners include BASF, Bayer AG, Siamdutch Mosquito Netting Company, A-Z Textiles and Vestergaard Frandsen. AED is currently in negotiations with these companies and others for the expansion of the program throughout sub-Saharan Africa.

Since its launch in 1999 NetMark has worked closely with the commercial sector to identify and overcome the barriers to the creation of commercially viable markets for ITNs in Ghana, Nigeria, Senegal and Zambia that would lessen the burden on the public sector by creating demand and corresponding supply for those who can afford to pay, thereby allowing the public sector to use its limited resources to focus more on those most at risk and who cannot afford to pay.

In September 2002, USAID amended the cooperative agreement with AED to allow for an expansion of NetMark into new countries and broadening its mandate beyond the program's original focus on commercial expansion. Now named NetMark Plus, the program is designed to create better links between the three components of Roll Back Malaria's *Strategic Framework for Scaling Up Insecticide-Treated Netting (ITN) Programmes in Africa*: commercial expansion, subsidized time-limited interventions (market priming), and sustained equity provision interventions (targeted subsidies).

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Tuberculosis Coalition For Technical Assistance (TBCTA)

Cooperating Agency	Royal Netherlands Tuberculosis Association (KNCV) and other coalition members
Project Number	936-3100.05
Grant Number	HRN-A-00-00-00018-00
Duration	9/00-9/05
Geographic Scope	Worldwide

Purpose: Improve and expand the capacity of USAID to respond to the global tuberculosis epidemic by providing state-of-the-art, context-appropriate, technically sound, and cost-effective consultation and technical assistance to high-burden countries and USAID missions.

Description: The TB Coalition is a unique partnership of six of the leading international organizations and NGOs involved in global TB control. The Coalition includes: the Royal Netherlands Tuberculosis Association (KNCV); the International Union against Tuberculosis and Lung Disease (IUATLD); the American Lung Association (ALA); the American Thoracic Society (ATS); the Centers for Disease Control and Prevention (CDC); and the World Health Organization (WHO). As the signatory organization, KNCV will be responsible for day-to-day management and will be directly responsible to USAID.

Working through USAID and its local partners (public, private, NGO, donor) in developing countries, the TBCTA will help accelerate the implementation and expansion of DOTS (directly observed treatment, short-course) strategies through the following: providing policy and programmatic guidance at the national and local level; building institutional and technical capacity for TB control and prevention; training high quality technical assistants as well as assisting in the access to qualified TB consultants; improving the integration of TB efforts into primary care services; establishing or strengthening the linkages between TB control programs and HIV/AIDS prevention and treatment programs; guiding operations research to improve DOTS and TB services; assisting in the monitoring and reporting of processes and outcomes of DOTS expansion efforts; supporting advocacy and communication efforts for TB control and prevention.

Examples of activities undertaken by the TBCTA include: country assessments; assistance with program and project development; program review and monitoring; technical training and workshops; support for intra- and inter-country strategies; operations research; technical support to countries for applications for the Global Fund (GFATM) and Global TB Drug Facility; multiple-drug resistance activities; TB laboratory strengthening; regional TB program evaluations.

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Basic Support for Institutionalizing Child Survival II (BASICS II)

Cooperating Agency	Partnership for Child Health Care, Inc.
Project Number	936-3096.01
Contract Number	HRN-C-00-99-00007-00
Duration	6/99-6/04
Geographic Scope	Worldwide

Purpose: The Basic Support for Institutionalizing Child Survival Activity (BASICS II) is a major component of GH's global work to implement USAID's Child Survival program. BASICS II develops innovative and improved policies and program approaches, provides technical leadership within the Agency and the international Child Survival program community, and enters into technical partnerships with field missions and other bureaus to improve the technical quality and effectiveness of programming in USAID-assisted countries.

Description: BASICS II is designed to incorporate state-of-the-art expertise, extensive field experience and capability in the development and implementation of Child Survival programming in developing countries. It also influences global and country policies and strategies related to child health and nutrition. It applies its expertise to assist GH – in partnership with other USAID bureaus and missions, other international health organizations, and USAID-assisted countries – in achieving the GH strategic objective of “increased use of effective, improved and sustainable child health interventions” and in contributing to the Agency's strategic objective of “improving infant and child health and nutrition and reducing infant and child mortality.” BASICS II is organized around four key technical focus areas:

1. Increased effectiveness and sustainability of child immunization;
2. Integrated approaches to child health;
3. Incorporating nutrition into Child Survival activities;
4. Neonatal survival and health.

In addition to these four technical focus areas, the project gives special attention to malaria and HIV/AIDS as it impacts on child health. BASICS II is a performance-based contract that achieves its results through the provision of technical leadership, regional and global initiatives, capacity building, and long-term country programs. BASICS II also provides expertise in operations and evaluation research, performance and results monitoring, and strategic documentation and transfer of experience, to support achievement of results in its technical focus areas and country and regional programs.

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The CHANGE Project

Behavior Change Innovation/State-of-the-Art Activity

Cooperating Agency	Academy for Educational Development (AED)/ The Manoff Group
Project Number	936-3096.04
Agreement Number	HRN-A-00-98-00044-00
Duration	9/98-9/04
Geographic Scope	Worldwide

Purpose: To provide a focused source of leadership and technical assistance on behavior change to PHN programs worldwide. The purpose of the project is to develop and apply new, state-of-the-art techniques for behavior change that will allow missions to increase the impact, sustainability, scale and cost-effectiveness of their interventions in child health, maternal health, and nutrition.

Description: Over 25 years of IEC (information, education, and communication) and social marketing interventions have resulted in numerous solid successes for PHN programs. However, in many programs, significant gaps between knowledge and behavior still remain, and key areas of behavior change such as at the institutional, community, and family levels are not addressed. The CHANGE Project is designed to develop and apply innovative new tools and approaches drawn from the full range of disciplines in the field of applied behavior change to help missions close “knowledge-behavior” gaps and address behavior change at many levels. Some of the new approaches being developed and applied by CHANGE include:

- tools to produce supportive policy and institutional environments through techniques of structural or organizational change;
- techniques to accomplish group and community change through normative and relational change approaches;
- improved techniques for individual behavior change;
- improved approaches to social marketing; and
- application of leading edge technologies in media and communication.

CHANGE can work with regional bureaus and field missions to implement new behavior change programs or can work with existing cooperating agencies and contractors to strengthen existing programs by introducing and supporting new approaches. CHANGE also can provide strategic review and guidance for existing programs and programs under development.

The CHANGE partnership with USAID is through a cooperative agreement and through USAID Mission contributions. CHANGE is implemented in partnership with USAID-financed collaborating agencies and can work with other international donors and both U.S. based and local PVOs. When working with PVOs, CHANGE project funds can be used to supplement existing project staffing and other direct costs to these organizations as needed within the context of a CHANGE project intervention.

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Child Health Research: Applied Research in Child Health (ARCH)

Cooperating Agency	Boston University
Project Number	936-5986.09
Agreement Number	HRN-A-00-96-90010
Duration	8/96-9/04
Geographic Scope	Worldwide

Purpose: The ARCH Project, a partner in the Child Health Research Project, supports policy relevant applied and operations research efforts that are initiated, designed, and managed by host country scientists and institutions. ARCH provides technical assistance to USAID Missions in problem analysis and design of health programs.

Description: ARCH works in four broad themes:

Theme I: Interventions to Improve Child Survival

- Improving ARI and diarrheal diseases prevention and case management through testing of improved behavioral, micronutrient and clinical approaches; and,
- Improving the use of medicines, especially antimicrobials, that contribute to the emergence of antimicrobial resistance.

Theme II: Economic Analyses and Health:

- Conducting burden of antimicrobial resistance on health systems and facilities;
- Assessing benefits of greater investments in expanded HIV prevention and HIV/AIDS treatment; and,
- Analyzing the impact of HIV/AIDS epidemic on private sector firms and government institutions.

Theme III: Understanding the Social and Economic Impact of the HIV Epidemic

- Identifying and developing interventions to address the health needs of orphans.
- Policy analysis of the “burden shift” of the costs of responding to the epidemic among business, government, and households.

Theme IV: Malaria and Child Survival

- Institutional Collaboration grant with National Malaria Control Program in Zambia
- Bilateral malaria research programs in Zambia and Nigeria

Selected Accomplishments:

- Demonstrated that both small group lecture-style and interactive sessions are effective in altering and improving antimicrobial prescribing practices by health care personnel;
- Demonstrated that the beneficial effect of using a reduced salt concentration ORS for the treatment of children with acute non-cholera diarrhea
- Demonstrated that the impact of the HIV epidemic on private companies varies widely among and within firms, and most firms will have positive returns on investment on HIV treatment and prevention
- Gathered and disseminated useful information on regional differences in *in vivo* chloroquine resistance and predictors of chloroquine treatment failures.

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Child Health Research ICDDR,B: Centre for Health and Population Research, Bangladesh

Cooperating Agency	ICDDR,B: Centre for Health and Population Research
Project Number	936-5986.06
Agreement Number	HRN-A-00-96-90005
Duration	1/96-1/04
Geographic Scope	Worldwide

Purpose: ICDDR,B focuses on the development of cost-effective child health and survival programs by enhancing the understanding of the major causes of childhood morbidity and mortality. The ICDDR,B conducts research, maintains active training programs, develops rapid response protocols and programs and tests cost-effective public health interventions through operations research.

Description: The ICDDR,B, a leading international research institution located in Bangladesh, is engaged in the development, delivery and use of effective family health and child survival technologies through applied, evaluation and operations research. Emphasis is placed on south-south collaboration and developing institutional relationships with health research organizations regionally. The ICDDR,B maintains an active urban operations research initiative and a unique demographic research effort in Matlab, for epidemiological studies including cholera, epidemic surveillance, and evaluation of reproductive, maternal, and child health interventions. In addition, ICDDR,B provides training in case management, performs laboratory diagnosis, and serves as a laboratory reference center. ICDDR,B works directly with Missions. Priority activities include:

- Developing new interventions and approaches in preventing and treating diarrheal diseases (DD) and acute respiratory infections (ARI);
- Developing and testing new interventions to address malnutrition and micronutrient deficiencies;
- Reducing Neonatal morbidity and mortality by developing interventions to address low birth weight, bacterial vaginosis, and sepsis;
- Conducting surveillance, trend analyses and developing strategies to address DD, ARI antimicrobial resistance, RTI/STC, HIV/AIDS, dengue and tuberculosis; and,
- Improving health systems and delivery of family planning services through operations research.

Recent achievements and ongoing efforts include:

- Development and implementation of a successful Essential Services Package for child and reproductive health;
- Establishing the effectiveness of oral zinc in the treatment of childhood diarrheal disease;
- Launch of a multidisciplinary, intergenerational approach to address low birth weight and malnutrition;
- Establishment of a national response program to dengue; and
- Development of ARI antimicrobial resistance surveillance capacity in Nepal.

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Child Health Research: Family Health and Child Survival (FHACS)

Cooperating Agency	Johns Hopkins School of Public Health
Project Number	936-5986.05
Agreement Number	HRN-A-00-96-90006
Duration	1/96-1/04
Geographic Scope	Worldwide

Purpose: The Johns Hopkin's Family Health and Child Survival (FHACS) cooperative agreement identifies new technologies and methods for improving child survival and family health. The emphasis is on the development of effective and integrated services that impact child survival and control of infectious diseases and nutritional deficiency in developing countries.

Description: FHACS develops and evaluates the feasibility and cost-effectiveness of new interventions and approaches to reducing child morbidity and mortality. It conducts applied, operations and evaluation research. Priority areas include:

- Determination of burden of disease for acute respiratory infections, diarrheal diseases and malnutrition including ascertaining risk factors;
- Reduction of neonatal morbidity and mortality;
- Evaluation of vaccines and development of diagnostics for acute respiratory infections and multi-drug resistant tuberculosis;
- Development and delivery of interventions to address malnutrition and micronutrient deficiencies; and
- Development of new approaches to treat and control malaria, tuberculosis, and other infectious diseases.

Recent achievements and ongoing efforts include:

- Demonstration that zinc supplementation reduces childhood morbidity due to pneumonia and diarrhea and may also reduce all-cause mortality;
- Finding of high efficacy of pneumococcal vaccine in prevention of meningitis;
- A community-based treatment of neonatal sepsis and pneumonia;
- Recommendations for neonatal and perinatal health interventions that can be implemented into programs; and
- A new, rapid diagnostic for multi-drug resistant TB.

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Child Health Research: International Clinical Epidemiology Network (INCLLEN)

Cooperating Agency	International Clinical Epidemiology Network (INCLLEN)
Project Number	936-5986.12
Grant Number	HRN-G-00-99-00003
Duration	3/99-1/04
Geographic Scope	Worldwide

Purpose: INCLLEN, a network of leading host country clinical epidemiologists, health economists, social scientists, healthcare providers and applied researchers, conducts training to build capacity and utilizes state-of-the-art epidemiological research methods to identify health threats and to analyze the efficacy, efficiency, and equity of health interventions and preventive measures.

Description: INCLLEN's network operates in 24 developing countries including Egypt, India, Uganda, Zimbabwe, Mexico, Philippines, Thailand, Indonesia, and Brazil. INCLLEN's host country scientists conduct relevant training and research providing solutions to improve the health of people. The INCLLEN networks address country-specific, interregional, and international child survival challenges.

Currently INCLLEN assists USAID Missions and AID/W by conducting surveillance, assessments, and evaluations. INCLLEN is currently:

- Establishing surveillance approaches for malaria, tuberculosis, STIs, and other infectious diseases;
- Creating a network of sentinel surveillance sites in hospitals and in the community to monitor the magnitude of pneumococcal disease and antimicrobial resistance of ARI pathogens;
- Improving birth outcomes by establishing a reproductive health network that can better diagnose and treat group B strep and bacterial vaginosis, decreasing the incidence of prematurity and low birth weight; and
- Fostering a focused child health research network (INCLLEN ChildNET), with members from Asia, Africa and Latin America, to address outstanding health research priorities such as ARI, malaria, and nutrition.

Recent achievements and ongoing efforts include:

- Establishment of IndiaCLEN Invasive Bacterial Infection Surveillance, which demonstrated that H. influenza is the most common cause of childhood bacterial meningitis in India and suggested the use of the Hib vaccine will prevent up to 97% of all invasive haemophilus disease seen in hospitals in India;
- Surveillance of antimicrobial resistance of ARI pathogens in hospitals and in the community in India;
- Assessment of the impact of National Immunization Days for Polio on other primary care programs;
- Evaluation of short-term amoxicillin therapy for childhood pneumonia.

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Child Health Research: World Health Organization/Child and Adolescent Health and Development (WHO/CAH)

Cooperating Agency	World Health Organization (WHO)
Project Number	936-5986.08
Grant Number	AAG-G-00-99-00005-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To identify, sustain, and increase the effectiveness of strategies and technologies that advance child survival in developing countries. As a partner in the Child Health Research Project, WHO/CAH refines existing technologies and develops new and cost-effective interventions to reduce mortality and morbidity associated with major childhood illnesses. Results of these efforts establish global and national guidelines, standards and policies used by health practitioners in hospitals, clinics, and community settings.

Description: WHO/CAH, works with global partners including applied researchers, bilateral agencies, and host countries to:

- Monitor and coordinate research that will result in new interventions, methodologies, and/or the establishment of global guidelines for case management and prevention of the major causes of neonatal and childhood mortality and morbidity - acute respiratory infections, diarrheal diseases, malaria, malnutrition and micronutrient deficiencies; low birth weight, and sepsis;
- Facilitate operations research for the implementation of best practices in case management and the development of training modules; and,
- Monitor and evaluate progress of advances in child health.

Recent achievements and ongoing efforts include:

- Implementation, adaptation, and evaluation of the Integrated Management of Childhood Illness (IMCI) approach;
- Identification and potential treatments for the major causes of infectious illness in neonates;
- Demonstration of new vaccine efficacy prior to incorporation into national vaccine programs;
- Development of strategies for families and health-care providers to prevent disease and increase care seeking; and,
- Reduction of infectious disease mortality – even in areas of endemic HIV – with exclusive breastfeeding.

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Children's Vaccine Program (CVP): Vaccine Independence Initiative (VII)

Cooperating Agency	UNICEF
Project Number	936-6000.01
Grant Number	HRN-G-00-92-00011-00
Duration	1/92-9/03
Geographic Scope	Worldwide

Purpose: To promote the sustainability of national immunization programs by providing a mechanism for the forecasting, financing, and procurement of high-quality vaccines.

Description: Childhood immunization programs have been one of the great public health success stories in the past two decades, with an estimated 2.5 million child deaths now prevented annually through national Expanded Programs for Immunization (EPI). However, the sustainability of these achievements is jeopardized by the dependence of many developing countries on donations of vaccines from UNICEF and bilateral donors. Due to financial constraints of donors and concerns about sustainability, many countries that currently receive vaccines by donations are being encouraged to start purchasing at least a portion of their own vaccines. Yet many are unable to:

- accurately forecast and plan vaccine needs;
- prepare a vaccine tender and negotiate directly with manufacturers; or
- supply the hard currency that manufacturers require in advance of vaccine delivery.

USAID Children's Vaccine Initiative Project, in partnership with UNICEF, designed the Vaccine Independence Initiative (VII) to help countries overcome these obstacles. The VII is a vaccine-purchase revolving fund. It is modeled after a similar fund managed by the Pan American Health Organization that has successfully functioned in Latin America for over a decade. The potential benefits of the VII extend to all countries (outside Latin America) who are committed to buying vaccines and who need assistance in forecasting, planning, and ordering those vaccines. To participate in the VII, countries must formally commit, in written agreements with UNICEF, to purchase some or all of their vaccine needs. UNICEF will then provide technical assistance to the countries to enhance their capabilities in vaccine supply forecasting and planning. The fund allows participating countries to use soft or hard currency to purchase the high-quality vaccines on a routine basis and to pay, if necessary, upon receipt of the vaccines. Purchase of the vaccines is undertaken using the well-established UNICEF procurement system, which has successfully negotiated low prices for high-quality vaccines for many years.

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Health and Emergency Response Support (NGO's: Polio Eradication and Immunization)

Cooperating Agency	CORE Group (A consortium of NGOs working in Child Survival)
Project Number	936-3080.04
Agreement Number	HRN-A-00-98-00053-00
Duration	9/98-9/07
Geographic Scope	Africa, Asia

Purpose: To increase PVO participation in polio eradication, immunization and vitamin A activities and to improve case detection of acute flaccid paralysis (AFP) and other reportable diseases in underserved or hard to reach populations.

Description: The CORE group is a network of 35 US-based private voluntary organizations that have received funding from the USAID Bureau of Humanitarian Response's child survival grants in the past for improving maternal and child health in underserved populations. This agreement strengthens the network and builds upon ongoing field programs of CORE members. This grant supports: 1) the development of community-based case detection and reporting strategies for acute flaccid paralysis and other vaccine preventable diseases. These strategies will complement and enhance the facility-based approaches being developed by other implementing agencies; 2) the training and information dissemination about polio eradication and AFP/integrated disease case detection and reporting; 3) the participation of PVOs in interagency coordinating committees and subnational planning events; and 4) PVO participation in supplemental immunization activities (NIDs, SNIDs, mop-up). CORE members from any polio endemic or recently endemic country can request funding under this agreement (via the CORE central office). Requests for funding must be coordinated with the respective national polio program. Linkages between CORE members and with local PVOs are encouraged. The CORE central office will monitor and track PVO participation in polio eradication, develop a set of indicators to measure the contribution of PVOs towards this effort; and document and disseminate the lessons learned from polio eradication in order to strengthen routine EPI and other disease control efforts in the future. Over the life of the project, CORE will integrate vitamin A activities into country-specific efforts as part of their child survival programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for AFP and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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Health and Emergency Response Support (WHO: Polio, Immunizations, CS)

Cooperating Agency	World Health Organization (WHO)
Project Number	936-3080.03
Grant Number	AAG-G-00-97-00019-00
Duration	6/95-9/07
Geographic Scope	Worldwide

Purpose: To implement activities to eradicate polio; improve immunization services; and improve disease surveillance.

Description: This grant supports activities implemented through WHO country offices, regional offices and headquarters in support of polio eradication in the context of strengthening immunization and disease control programs.

The grant supports USAID's five-part polio eradication strategy: 1) to build effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/ management/ logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level and to support the polio laboratory network; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination, and progress towards certification.

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Health and Immunization Response Support (UNICEF Umbrella Grant: Polio, EPI, MCH)

Cooperating Agency	UNICEF
Project Number	936-3080.01
Grant Number	AAG-G-00-97-00021-00
Duration	6/95-9/07
Geographic Scope	Worldwide

Purpose: To implement activities designed to improve child and maternal health worldwide, including: worldwide polio eradication efforts; improved immunization services; introduction of Integrated Management of Childhood Illness (IMCI) programs, support for micronutrient fortification and supplementation programs (specifically iodine and vitamin A); and monitoring progress towards the world summit for children goals.

Description: This grant funds several activities implemented through UNICEF's country, regional and headquarter offices in support of polio eradication, EPI, IMCI, micronutrient fortification, and child and maternal health. Funding these multiple components provides improved integration of service delivery.

The Polio Eradication component supports USAID's five-part strategy: 1) to building effective partnerships between all interested public and private sector parties through interagency coordinating committees (ICCs) and to conduct advocacy activities to promote the program; 2) to improve routine immunization and immunization systems: cold chain refurbishment/management/logistics, vaccine forecasting, detailed planning and budgeting at the district and national levels; 3) to provide supplemental immunization through training, operational support to National Immunization Days (NIDs), social mobilization, house-to-house mop up immunization, consideration of vitamin A and other antigens; 4) surveillance and case detection for acute flaccid paralysis (AFP) and other reportable diseases such as measles, neonatal tetanus, yellow fever, and meningitis at the community and facility level; 5) information feedback and use, e.g. operations research, monitoring and evaluation, information dissemination.

The EPI component supports routine immunization program strengthening through 1) planning and management of programmatic and financial resources to assure vaccines and equipment are available on a sustained bases; 2) improved quality and cost effectiveness of immunization services, e.g. IMCI, vitamin A, cold chain, integrated disease surveillance; 3) building effective partnerships to improve coordination and collaboration; and 4) monitoring and evaluation of results.

The IMCI component supports the introduction of the program through improving the performance of health workers through in-service and on-the-job training and through improvements in household and community preventive health practices.

The micronutrient fortification and supplementation component focuses on addressing the global goal of reducing micronutrient deficiencies worldwide. Current emphasis has been focused on eliminating iodine deficiencies by increasing iodized salt consumption in specific countries in East Asia and Africa.

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HealthTech IV: Technologies for Child Health

Cooperating Agency
Project Number
Agreement Number
Duration
Geographic Scope

Program for Appropriate Technology in Health
936-3096.07
GPH-A-00-01-00005
9/01-9/06
Worldwide

Purpose: HealthTech identifies health needs in low-resource countries that can be addressed with technological solutions, then develops, adapts, evaluates and facilitates the introduction of innovative and appropriate health, nutrition and family planning technologies to meet those needs.

Description: For over 15 years, USAID has supported the development, evaluation and introduction of innovative technology solutions to health needs that are applicable to the prevention and treatment of disease in the developing world. Most technologies are developed in partnership with private sector companies and international health organizations.

Technologies successfully developed and already available on the market include:

- SoloShot: the first autodestruct syringe device, available globally through UNICEF;
- UniJect: a pre-filled, single-dose injection system usable with multiple medicaments including vaccines, injectable contraceptives, and uterotonics;
- Vaccine Vial Monitors: time/temperature-sensitive indicators on individual vials of vaccines, which can alarm health workers about unacceptable heat exposure;
- Affordable, point-of-care diagnostic for malaria, which allows patients to be diagnosed and treated on the same day; and
- HIV Dipstick: an affordable, simple HIV test that exceeds WHO standards.

Other technologies under development include:

- Affordable, point-of-care diagnostics for tuberculosis, chlamydia and gonorrhea;
- Inexpensive test to assess vitamin A status in populations to enable countries to better target and monitor interventions;
- Medical waste disposal technologies; and
- Inexpensive jet injector for delivery of vaccines without a needle.

In addition, the HealthTech project offers technology-related services and assistance as requested by Missions or Bureaus. Examples of past activities include:

- Management of a schistosomiasis vaccine development project in Egypt;
- Training in procurement of vaccines to the Ministry of Health in Armenia;
- Assistance in technology transfer to the medical products industry in India;
- Development of health information systems and disease tracking in Ukraine;
- AIDS prevention and education programs in collaboration with NGOs in Indonesia; and
- Collaboration on the development of a website on safe injection for Bureau for Global Health.

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Initiative for Maternal Mortality Programme Assessment (IMMPACT)

Cooperating Agency	University of Aberdeen
Project Number	936-3092.04
Agreement Number	GPH-00-02-00015-00
Duration	09/02-09/06
Geographic Scope	Worldwide

Purpose: To strengthen the evidence base for safe motherhood.

Description: To respond to the needs of decision makers who are faced with allocating scarce health resources to intervention strategies of unproven benefit for reducing maternal mortality and severe morbidity, this global initiative will determine effective and cost-effective strategies and their implications for equity and sustainability.

To generate this new knowledge, IMMPACT will develop the crucial methods and tools needed for measuring outcomes relevant to safe motherhood and for attributing change to specific intervention strategies. This work will be undertaken within the first four years of the initiative through an integrated network of country technical partners and international experts. Alongside the essential development research, IMMPACT will also strengthen capacity for rigorous outcome evaluation in the focus countries, starting in Burkina Faso, Ghana and Indonesia. Other countries may be added at a later date.

International technical partners include University of Aberdeen working in partnership with University of York, London School of Hygiene and Tropical Medicine, Institute of Tropical Medicine at Antwerp, and a North American consortium of institutions coordinated by Johns Hopkins University. An alliance supporting this major international research program includes the Bill and Melinda Gates Foundation, the Department for International Development, the Wellcome Trust, the World Bank, WHO and UNFPA.

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International Broadcasting Bureau/Voice of America

Cooperating Agency	Voice of America (VOA) IBB
Project Number	936-3096.10
Agreement Number	AAG-P-00-01-00001
Duration	4/01-9/05
Geographic Scope	Worldwide

Description: Through special programming developed by the Voice of America radio and TV operations, IBB has become a partner in the global effort to eradicate polio. The polio-related programming seeks to keep the world's attention on the effort through realistic reporting on the global eradication effort as well as to provide accurate health messages and news reports designed to mobilize adults to immunize children during National Immunization Days and routinely throughout the year. The Initiative also seeks to influence the media in targeted countries to continue providing coverage of National Immunization Days and to generate interest among political elites for continued support of the eradication effort. Funding under this agreement provides for travel and related activities by the Voice of America radio staff in targeted countries in Africa, South and Central Asia and the Near East where eradication is yet to be achieved. In 2001, for the first time HIV/AIDS reporting was included as part of the USAID/VOA agreement. In 2002, Anti-Microbial Resistance, AMR, also became part of the USAID/VOA agreement.

The agreement includes an activity to develop a CD-ROM for training health journalists in developing countries, specifically focusing on Reproductive Health, HIV/AIDS, disasters and polio. The CD-ROM is in use in journalism and communication schools as well as with working journalists.

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Maternal and Child Health Technical Assistance and Support Contract (TASC)

Cooperating Agency	Various (See Below)
Project Number	936-3096.02
IQC Number	HRN-I-00-98-00028-00 to HRN-I-00-98-00035-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: To support USAID Bureaus and Missions in the implementation of their Strategic Objectives pertaining to maternal health, child health and nutrition.

Description: TASC will provide Missions and Bureaus with long-term teams of resident advisors to help implement programs, short-term technical assistance, and/or support services in maternal health, child health and nutrition. TASC can support integrated MCH programs, beyond the scope of specialized Global activities.

As a Multicontractor Indefinite Quantity Contract (IQC), services will be provided to Missions by a pre-selected group of eight highly qualified cooperating agencies and their twenty-eight subcontractors, providing a wide range of state-of-the-art specialists and expertise. These cooperating agencies will respond to scopes of work developed by a Mission or Bureau, with award of each task order being made by their Contracting Officer, based on review of cost, proposed staff, and technical quality of the responses, as determined by the Mission.

Special Restrictions: This project cannot take Field Support funds.

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Maternal and Neonatal Health Program (MNH)

Cooperating Agency	JHPIEGO Corporation
Project Number	936.3092.01
Agreement Number	HRN-A-00-98-00043-00
Duration	10/98-09/04
Geographic Scope	Worldwide

Purpose: The Maternal and Neonatal Health Program (MNH) is the principal USAID initiative for applying, testing and implementing new approaches and technologies to reduce maternal and newborn deaths in developing countries.

Description: The Maternal and Neonatal Health Program directly supports the Agency's goal of reducing deaths, nutrition insecurity and adverse health outcomes to women as a result of pregnancy and childbirth, and has significant impact on infant and child survival. The program provides short- and long term technical assistance to countries to increase the use of appropriate maternal and neonatal health and nutrition practices and services. A systems approach is used in the following focus areas: 1) integration of appropriate maternal nutrition interventions into programs; 2) improved birth preparedness, including awareness, access, community planning and appropriate antenatal care; 3) improved management of complications; and 4) improved safe delivery, postpartum and newborn care.

The program is intended to increase the demand for and supply of maternal health services through community, family, and women's participation, and to create enabling health systems through policy development and advocacy, research, human resources and management interventions, and strengthened service delivery and quality assurance practices.

Partners: The Centre for Development and Population Activities (CEDPA); Johns Hopkins University Center for Communication Programs (JHU/CCP); and Program for Appropriate Technology in Health (PATH).

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Technical Assistance and Support Contract II (TASC II)

Cooperating Agency	TBD
Project Number	TBD
IQC Number	TBD
Duration	TBD
Geographic Scope	TBD

Purpose: To support USAID Bureaus and Missions in the implementation of their Strategic Objectives pertaining to Child Health, Maternal Health and Nutrition, Population, HIV/AIDS and Infectious Diseases, Tuberculosis, and Media Relations, Public Opinion, Polling and Advocacy.

Description: TASC II will provide Missions and Bureaus with cost-effective access to technical expertise and implementation support to meet evolving USAID needs in Child Health, Maternal Health and Nutrition, Population, HIV/AIDS and Infectious Diseases, Tuberculosis, and Media Relations, Public Opinion, Polling and Advocacy.

As a Multicontractor Indefinite Quantity Contract (IQC), services will be provided to Missions by a pre-selected group of highly qualified cooperating agencies and their subcontractors, providing a wide range of state-of-the-art specialists and expertise. These cooperating agencies will respond to scopes of work developed by a Mission or Bureau, with award of each task order being made by their Contracting Officer, based on review of cost, proposed staff, and technical quality of the responses, as determined by the Mission.

Special Restrictions: This project cannot take Field Support funds.

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Vaccine Endowment

Cooperating Agency	Ani & Narod Memorial Fund
Project Number	963-3096.08
Agreement Number	GPH-A-00-01-00018-00
Duration	Armenia
Geographic Scope	10/01-9/06

Purpose: an innovative public-private partnership model designed to explore an alternative approach to creating a sustainable financial source for childhood vaccines provided through National Immunization Programs.

Description: This activity is a community effort of the Armenian Diaspora to create an endowment that will ensure a reliable financial source for the vaccine provided through the Government of Armenia's National Immunization Program. The Ani & Narod Memorial Fund (ANMF) is spearheading a three-tier fundraising campaign targeted at the Armenian Diaspora and other donors. Given the small birth cohort in Armenia approximately \$1.4-1.6 million is needed for the endowment core, which will generate an annual income of approximately \$100,000. USAID/Yerevan and USAID/Washington have collectively contributed \$400,000. ANMF will be responsible for fundraising the matching contribution that will generate the annual income for the vaccine. ANMF is serving as a member of the Armenian Immunization Coordinating Committee and will be procuring vaccine through UNICEF in compliance with the Armenian National Immunization Plan.

This activity creates the opportunity to identify a model that:

- Addresses the gaps in financial support that occur from donor fatigue;
- Leverages funds, while releasing future USAID funds for other health activities;
- Creates a sustainable supply of vaccine to prevent childhood illness and death;
- Breaks the cycle of donor dependence;
- Uses UNICEF as a procurement agent to address concerns regarding quality assurance and delivery of vaccine; and
- Constitutes an innovative public-private partnership between USAID and a PVO, which explores a potentially replicable model to secure financial support for vaccines.

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Food and Nutrition Technical Assistance (FANTA)

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-3094.01
Agreement Number	HRN-A-00-98-00046-00
Duration	8/98-9/08
Geographic Scope	Worldwide

Purpose: The Food and Nutrition Technical Assistance (FANTA) project is designed to leverage maximum nutritional impact of nutrition and food security-related programs implemented by USAID and its partners in developing countries.

Description: FANTA provides technical assistance in nutrition and food security-related program design, implementation, monitoring, and evaluation as well as nutrition and food security policy and strategy development. This program has an unprecedented opportunity to influence the nutritional and health impact of food security and Title II food aid programming, both through its role in providing direct assistance to Private Voluntary Organizations (PVOs) and Cooperating Sponsors, Missions, host governments, the USAID Bureau for Democracy, Conflict and Humanitarian Assistance (DCHA), and through its role in facilitating technical exchange and cooperation with other ongoing GH activities.

FANTA's Strategic Objective is "improved food/nutrition policy, strategy and program development" with three Intermediate Results (IRs):

- IR1: USAID's and PVOs' nutrition and food security-related program development, analysis, monitoring and evaluation improved;
- IR2: USAID, host country governments and PVOs establish improved, integrated nutrition and food security-related strategies and policies; and
- IR3: Best practices, and "acceptable standards" in nutrition and food security-related policy and programming adopted by USAID, PVOs and other key stakeholders.

Partners: Cornell University; Tufts University; International Food Policy Research Institute; and Food Aid Management (FAM).

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Helen Keller International (HKI)

Cooperating Agency	Helen Keller International (HKI)
Project Number	936-5122.04
Agreement Number	HRN-A-00-98-00013-00
Duration	10/97-9/03
Geographic Scope	Africa, Asia

Purpose: The overall goal of this five-year Cooperative Agreement is to contribute to sustainable reductions in micronutrient malnutrition among children and women in Africa and Asia through technical assistance to governments, private voluntary organizations (PVOs) and local non-governmental organizations (NGOs).

Description: HKI's nutrition programs initially focused on preventing xerophthalmia, the clinical form of vitamin A deficiency (VAD) that remains the leading cause of childhood blindness in developing countries. As the link between VAD and child mortality became clear, the nutrition program expanded to address subclinical VAD in vulnerable populations, particularly among preschool children. A recent field trial in Nepal suggests that improving the vitamin A status of women during pregnancy may also reduce maternal mortality. HKI's program has over 30 years of experience in designing, implementing, monitoring and evaluating nutrition interventions for children and women, including twenty-four projects funded by USAID. HKI is a leader in expanding and strengthening vitamin A capsule distribution systems, with documented increases in coverage and decreases in deficiency in Asia and Africa. HKI has also worked to increase consumption of a variety of plant and animal sources of vitamin A through social marketing activities in Asia and Africa. The HKI Bangladesh NGO Home Gardening and Nutrition Education Program has led to increased year-round production of fruits and vegetables and greater consumption of vitamin A-rich foods in more than 300,000 households. In the Philippines, HKI has developed a model program to strengthen decentralized management of nutrition programs at the provincial and municipal levels. In Indonesia, HKI has been conducting operations research and promoting school-based delivery of vitamin A, iron, anthelmintic and nutrition education among adolescent girls. HKI is particularly effective in building the capacity of governments and NGOs in nutritional assessment, policy and program development, training, monitoring and evaluation, and operations research.

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LINKAGES: Breastfeeding and LAM, and Related Maternal and Young Child Nutrition

Cooperating Agency	Academy for Educational Development (AED)
Project Number	936-3082.01
Agreement Number	HRN-A-00-97-00007-00
Duration	11/96-10/06
Geographic Scope	Worldwide

Purpose: LINKAGES is the principal USAID initiative for improving breastfeeding (BF), Lactational Amenorrhea Method (LAM), and related maternal and child dietary practices. The focus of the program is on mainstreaming BF, LAM, and related complementary feeding and maternal dietary practices into ongoing Child Survival (CS), Maternal and Child Health (MCH), Family Planning (FP) and Emergency Relief Programs. The program also addresses Mother-to-Child Transmission (MTCT) issues in countries with high HIV prevalence, by providing accurate technical information and counseling, to enable women to make informed decisions about infant feeding.

Description: Principal activities include: 1) technical support to help CAs, PVOs, public sector programs, and other donors improve their BF, LAM, and related infant feeding and maternal nutrition activities; and focusing on mainstreaming these activities at all levels of service delivery, IEC, curricula, and monitoring and evaluation tools in MCH and FP programming; 2) development and testing of community-based strategies, peer counseling and other models, while linking to ongoing efforts in Baby-Friendly Hospital Initiatives (BFHI) and Integrated Management of Childhood Illness (IMCI); 3) interventions in cooperation with large PVO networks and scaling up proven strategies and technologies; 4) program-driven research such as operations research, cost-effectiveness, and country program assessments, with in-depth cross-site analysis and smaller focused studies of intervention components.

Partners/Collaborators: La Leche League International; Cooperative for Assistance and Relief Everywhere (CARE); Catholic Relief Services (CRS); and World Vision International (WVI).

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Micronutrients for Health (JHU)

Cooperating Agency	Johns Hopkins University (JHU)
Project Number	936-5122.05
Agreement Number	HRN-A-00-97-00015-00
Duration	8/97-9/03
Geographic Scope	Worldwide

Purpose: The main purpose of the Micronutrients for Health Cooperative Agreement (MHCA) is to conduct policy- and program-oriented research, provide global scientific leadership and advocacy, and carry out technical assistance and training in micronutrient deficiency prevention.

Description: The MHCA addresses key questions related to micronutrient deficiency control through population-based research. The MHCA seeks to advance knowledge and overcome constraints to developing policies and guiding programs toward effective micronutrient deficiency prevention and control. The MHCA is managed by the Center for Human Nutrition, Johns Hopkins University School of Hygiene and Public Health. Activities under the MHCA are conducted by investigators with extensive research capabilities and experience in micronutrient nutrition (including laboratory sciences), epidemiology, biostatistics, anthropology, and communications. The team of investigators has a track record that has led to long-term, productive relationships with counterpart institutions in over a dozen countries in Asia, Africa and Latin America. The MHCA research agenda includes (1) investigating the extent, severity and public health consequences of micronutrient deficiencies in high-risk populations, especially with respect to vitamin A, iron and zinc; (2) identifying determinants of micronutrient deficiencies that are likely to be responsive to interventions; (3) developing new, practical, less expensive and valid methods for targeting high-risk groups, assessing micronutrient status and intake in the community that can be used for surveys, surveillance and program monitoring; and (4) developing single and coordinated multiple-micronutrient interventions and evaluating their efficacy, effectiveness, cost, and safety.

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Micronutrient Global Leadership

Cooperating Agency	International Life Sciences Institute Research Foundation (ILSI)
Project Number	936-5122.07
Agreement Number	HRN-A-00-98-00027-00
Duration	10/98-9/03
Geographic Scope	Worldwide

Purpose: The Micronutrient Global Leadership Cooperative Agreement will provide scientific support to the leadership efforts of USAID to eliminate vitamin A deficiency and significantly reduce iron deficiency anemia.

Description: There are four components covered by the Micronutrient Global Leadership agreement. The first is the International Vitamin A Consultative Group (IVACG), which has been supported by USAID for 20 years. IVACG provides policy statements and state-of-the-art reviews of scientific questions of critical importance to the implementation of vitamin A deficiency control programs. IVACG also provides an exchange mechanism for scientific and programmatic information through its international meetings held every 18 months. The second component is the International Nutritional Anemia Consultative Group (INACG), which has also received support from USAID for 20 years. INACG provides policy guidance on issues critical to the implementation of iron deficiency anemia control programs. INACG is also involved in generating broad support for action by developing countries to control iron deficiency anemia. The third component is the VITA Global Alliance, a new approach to developing public-private partnerships to combat micronutrient malnutrition in developing countries. The private partners include U.S.-based and other food and ingredient companies, as well as nongovernmental organizations and civic groups. The final component is the use of expert panel consultations and targeted operational research to provide a better understanding of the factors that contribute to successful replication and expansion of micronutrient deficiency intervention programs.

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Micronutrient Operational Strategies and Technologies (MOST)

Cooperating Agency	International Science and Technology Institute (ISTI)
Project Number	936-3094.02
Agreement Number	HRN-A-00-98-00047-00
Duration	9/98-9/03
Geographic Scope	Worldwide

Purpose: The Micronutrient Operational Strategies and Technologies (MOST) Cooperative Agreement has as its primary purpose expanded and enhanced delivery of micronutrients to vulnerable populations through supplementation and food-based strategies, including fortification and dietary diversification. MOST will provide leadership in elevating micronutrients on the global health agenda, strengthening policies and programs, and sharing lessons learned about the most cost-effective technologies and delivery systems for alleviating micronutrient deficiencies.

Description: Under its mandate as USAID's flagship micronutrient project and in support of USAID's Enhanced Vitamin A Effort (VITA), MOST seeks to establish and maintain vitamin A adequacy in vulnerable populations, particularly young children and their mothers, in 5-8 countries through a combination of supplementation and food-based approaches. MOST is also committed to reducing iron deficiency anemia by 30% in 5-8 countries and contributing to the reduction of iodine deficiency disorders in selected countries by 30%. MOST takes a comprehensive approach to micronutrient deficiency reduction, targeting not only improved supply and delivery of micronutrients, but also generating and sustaining greater consumer demand. Attention is given to optimizing the mix of interventions, depending on the prevalence, distribution, and severity of micronutrient deficiencies in a country, the level of sophistication of the country's existing micronutrient programs, and the human and financial resources available. MOST seeks to engage the private sector as a partner with government, especially the food industry, to expand coverage and to establish mechanisms for sustaining successful programs. Economic analyses, as well as program evaluation, will be applied to direct the evolution of the micronutrient policy and program mix in order to realize high coverage in an affordable manner over the long term.

Other Partners: ISTI's partners in the MOST include: Johns Hopkins University (JHU); Helen Keller International (HKI); the Academy for Educational Development (AED); the International Food Policy Research Institute; Cooperative for Assistance and Relief Everywhere (CARE); Save the Children; Program for Appropriate Technology in Health (PATH); Population Services International (PSI); and the International Executive Service Corps (IESC).

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PVO Child Survival Grants Program (CSGP)

Cooperating Agency	See Subgrants *
Project Number	938-0500
Grant Number	See Subgrants *
Duration	See Subgrants *
Geographic Scope	Worldwide

Purpose: The PVO Child Survival Grant Program (CSGP) is a partnership supporting effective community oriented child survival programs that measurably improve infant and child health and nutrition and contribute to the reduction of infant and child mortality.

Description: The objective of the CSGP is to improve the capacity of U.S.-based PVOs and their local partners to carry out effective child survival programs that measurably improve infant and child health and nutrition, and contribute to the reduction of infant and child mortality.

The PVO CSGP aims for a) increased success of the programs in the CSGP in meeting their objectives and measurably improving the health of children and mothers; b) PVOs and USAID operating units jointly programming for community health activities; c) PVOs' increased resource mobilization for CS activities; d) PVOs' increased technical and operational support to local partners/NGOs for the design and implementation of child survival programs; and e) U.S. public awareness of the success of the PVO child survival program.

The PVO CSGP invests USAID resources in well designed, technically sound, cost effective programs that focus on activities and strategies which are expected to have the greatest and most sustainable reductions in mortality of children under five.

* See Subgrants on the following page.

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LIST OF ACTIVE PROJECTS - CHILD SURVIVAL AND HEALTH GRANTS PROGRAM
(As of December 6, 2002)

DOC: CS/DOCS/ADMIN 02-03/GRNTLIST 12-06-2002.xls (Active Grants)

COOPERATIVE					
No.	PVO	COUNTRY	AGREEMENT NO.	FROM	TO
1	ADRA	Cambodia	HFP-A-00-01-00039-00	09/30/01	09/29/06
	ADRA	Nicaragua	HFP-A-00-01-00032-00	09/30/01	09/29/06
	ADRA	Guinea	FAO-A-00-00-00025-00	09/30/00	09/29/04
	ADRA	Haiti	FAO-A-00-00-00026-00	09/30/00	09/29/03
	ADRA	Yemen	FAO-A-00-99-00036-01	09/30/99	09/29/03
	ADRA	Zambia	FAO-A-00-99-00037-00	09/30/99	09/29/03
	ADRA*	Madagascar	FAO-A-00-98-00042-01	09/30/98	03/29/03
2	AFRICARE	Ethiopia	FAO-A-00-00-00031-01	09/30/00	09/29/04
	AFRICARE	Malawi	FAO-A-00-99-00024-01	09/30/99	09/29/03
	AFRICARE	Uganda	FAO-A-00-99-00025-01	09/30/99	09/29/03
3	AKF	Tajikistan	FAO-A-00-00-00033-00	09/30/00	09/29/04
4	CARE	Ethiopia	HFP-A-00-02-00046-00	09/30/02	09/29/07
	CARE	Mozambique	HFP-A-00-01-00038-00	09/30/01	09/29/06
	CARE	Peru	FAO-A-00-00-00030-00	09/30/00	09/29/04
	CARE	Kenya	FAO-A-00-99-00029-01	09/30/99	09/29/03
	CARE	Nepal	FAO-A-00-99-00028-01	09/30/99	09/29/03
	CARE*	India	FAO-A-00-98-00075-00	09/30/98	09/29/03
	CARE	Nicaragua (EXT)	FAO-A-00-98-00076-01	09/30/02	09/30/07
5	CCF*	Angola	FAO-A-00-98-00059-01	09/30/98	04/29/03
	CCF	Senegal (EXT)	FAO-A-00-98-00067-01	09/30/02	09/29/06
6	CII	India	FAO-A-00-00-00028-00	09/30/00	09/29/04
	CII	Uzbekistan	FAO-A-00-00-00027-00	09/30/00	09/29/04

LIST OF CHILD SURVIVAL COOPERATIVE AGREEMENTS - As of December 06, 2002					
			COOPERATIVE		
No.	PVO	COUNTRY	AGREEMENT NO.	FROM	TO
7	CRS	Kenya	HFP-A-00-02-00041-00	09/30/02	09/29/07
	CRS	Cambodia	HFP-A-00-01-00042-00	09/30/01	09/29/06
	CRS	Phillippines	FAO-A-00-00-00037-00	09/30/00	9/29/2004
	CRS	Honduras	FAO-A-00-99-00012-01	09/30/99	09/29/03
8	Curamericas	Bolivia	HFP-A-00-02-00035-00	09/30/02	09/29/07
	Curamericas	Guatemala	HFP-A-00-02-00034-00	09/30/02	09/29/07
9	CWI	Rwanda	HFP-A-00-01-00044-00	09/30/01	09/29/05
	CWI	Bangladesh	FAO-A-00-00-00039-00	09/30/00	09/29/04
10	FOCAS/ARH	Haiti (Ext.)	FAO-A-00-97-00028-00	09/30/01	09/29/03
11	HAI	Mozambique (EXT)	FAO-A-00-98-00054-00	09/30/02	09/29/07
12	HKI	Mali	FAO-A-00-99-00015-01	09/30/99	09/29/03
13	HOPE	Kyrgyzstan	HFP-A-00-02-00025-00	'09/30/02	09/29/06
	HOPE	Nicaragua	HFP-A-00-02-00026-00	'09/30/02	09/29/06
	HOPE	Haiti	HFP-A-00-01-00031-00	09/30/01	09/29/06
	HOPE	Peru	FAO-A-00-00-00029-01	09/30/00	09/29/03
	HOPE	Uzbekistan	FAO-A-00-99-00026-01	09/30/99	09/29/03
	HOPE*	Malawi	FAO-A-00-98-00017-01	08/01/98	07/31/03
	HOPE	Guatemala	FAO-A-00-97-00030-00	09/30/01	09/29/05
14	IEF	Malawi	HFP-A-00-02-00027-00	'09/30/02	09/29/06
	IEF	Bolivia	FAO-A-00-99-00039-01	09/30/99	09/29/03
15	IRC	DRC	HFP-A-00-02-00021-00	09/30/02	09/29/06
	IRC	Rwanda	FAO-A-00-99-00011-00	09/30/01	09/29/05
16	MCDI	Bolivia	FAO-A-00-99-00023-01	09/30/99	09/30/03
	MCDI	Madagascar (EXT)	FAO-A-00-98-00027-00	09/30/98	09/29/06
	MCDI	S.Africa	FAO-A-00-97-00025-00	09/30/01	09/29/05
17	MCI	Azerbaijan	HFP-A-00-01-00014-00	09/30/01	09/29/06
	MCI	Honduras	FAO-A-0097-00052-00	09/30/01	09/29/03
18	PCI	Zambia	HFP-A-00-02-00045-00	'09/30/02	09/29/06
	PCI	Ghana	HFP-A-00-01-00043-00	09/30/01	09/29/06
19	PFD	Cambodia	FAO-A-00-00-00040-00	09/30/00	03/31/04

LIST OF CHILD SURVIVAL COOPERATIVE AGREEMENTS - As of December 06, 2002					
		COOPERATIVE			
No.	PVO	COUNTRY	AGREEMENT NO.	FROM	TO
20	PLAN	Mali	HFP-A-00-01-00046-00	09/30/01	09/29/06
	PLAN	Cameroon	FAO-A-00-00-00035-00	09/30/00	09/29/04
	PLAN	Burkina Faso	FAO-A-00-99-00059-01	09/30/99	09/29/03
	PLAN	Kenya	FAO-A-00-99-00058-01	09/30/99	09/29/03
	PLAN	Nepal	FAO-A-00-98-00042-00	09/30/01	09/29/06
21	PSBI	Philippines	FAO-A-00-99-00040-02	09/15/99	09/29/03
22	PSI	Cameroon	HFP-A-00-02-00043-00	09/30/02	09/29/05
	PSI	India	HFP-A-00-02-00042-00	09/30/02	03/30/05
	PSI	Rwanda	FAO-A-00-00-00024-00	09/30/00	09/29/03
	PSI	Haiti	FAO-A-00-98-00021-00	09/30/01	09/29/04
23	SC	Vietnam	HFP-A-00-02-00044-00	09/30/02	09/29/07
	SC	Bolivia	FAO-A-00-00-00010-00	09/30/00	09/29/04
	SC	Mozambique	FAO-A-00-00-00036-00	09/30/00	09/29/03
	SC	Malawi	FAO-A-00-99-00050-01	09/30/99	09/29/03
	SC	Nepal	FAO-A-00-99-00049-02	09/30/99	09/29/03
	SC	Tajikistan (EXT)	FAO-A-00-98-00022-00	09/30/02	09/29/07
	SC	Guinea (EXT)	FAO-A-00-98-00024-01	09/30/02	09/29/06
	SC	Ethiopia	FAO-A-00-97-00054-00	09/30/01	09/29/06
24	SAWSO	S. Africa	HFP-A-00-02-00040-00	09/30/02	09/29/07
25	WRC	Rwanda	HFP-A-00-01-00029-00	09/30/01	09/29/06
	WRC	Malawi	FAO-A-00-00-00050-00	09/30/00	09/29/04
	WRC	Mozambique	FAO-A-00-99-00042-01	09/29/99	09/29/03
	WRC	Cambodia (EXT)	FAO-A-00-98-00051-02	09/30/02	09/29/07
26	WVI	Kenya	HFP-A-00-01-00045-00	09/30/01	09/29/06
	WVI	Cambodia	FAO-A-00-00-00038-00	09/30/00	09/29/03
	WVI	Indonesia	FAO-A-00-99-00027-01	09/29/99	09/29/03
	WVI	S. Africa **	FAO-A-00-99-00043-02	09/30/99	09/29/03

**CHILD SURVIVAL GRANTS PROGRAM – PORTFOLIO
FY 2003**

Country	Primary	PVO (Dates)	CTO
Angola	Susan Youll	CCF (98-03)‡	Susan Youll
Azerbaijan	Tom Hall	MCI (01-06)	Sheila Lutjens
Bangladesh	Tom Hall	CWI (00-04)	Sheila Lutjens
Bolivia	Susan Youll	Curamericas (02-07) IEF (99-03) SC (00-04) MCDI (99-03)	Susan Youll Susan Youll Susan Youll Susan Youll
Burkina Faso	Tom Hall	Plan (99-03)	Susan Youll
Cambodia	Sheila Lutjens	ADRA (01-06) CRS (01-06) PFD (00-04) WRC (02-07)† WVI (00-03)	Sheila Lutjens Sheila Lutjens Sheila Lutjens Sheila Lutjens Sheila Lutjens
Cameroon	Tom Hall	Plan (00-04) PSI (02-05)	Susan Youll Sheila Lutjens
DRC	Sharon Mills	IRC (02-06)	Sheila Lutjens
Ethiopia	Susan Youll	Africare (00-04) CARE (02-07) SC (01-06)	Susan Youll Susan Youll Susan Youll
Ghana	Tom Hall	PCI (01-06)	Sheila Lutjens
Guatemala	Sharon Mills	Curamericas (02-07) HOPE (01-05)	Sheila Lutjens Sheila Lutjens
Guinea	Tom Hall	ADRA (00-04) SC (02-06)	Susan Youll Susan Youll
Haiti	Susan Youll	ADRA (00-03) FOCAS (01-03) HOPE (01-06) PSI (01-04)	Susan Youll Susan Youll Susan Youll Susan Youll
Honduras	Sheila Lutjens	CRS (99-03) MCI (01-03)	Sheila Lutjens Sheila Lutjens
India	Tom Hall	CARE (98-03)‡ CII (00-04) PSI (02-05) WVI (98-02)‡	Susan Youll Sheila Lutjens Sheila Lutjens Sheila Lutjens
Indonesia	Sheila Lutjens	WVI (99-03)	Sheila Lutjens
Kenya	Sharon Mills	CARE (99-03) CRS (02-07) Plan (99-03) WVI (01-06)	Susan Youll Sheila Lutjens Susan Youll Sheila Lutjens
Kyrgyzstan	Tom Hall	HOPE (02-06)	Sheila Lutjens
Madagascar	Tom Hall	ADRA (98-03)‡ MCDI (02-06)	Susan Youll Sheila Lutjens
Malawi	Susan Youll	Africare (99-03) HOPE (98-03)‡ IEF (02-06) SC (99-03) WRC (00-04)	Susan Youll Susan Youll Susan Youll Susan Youll Susan Youll
Mali	Tom Hall	HKI (99-03) Plan (01-06)	Susan Youll Susan Youll
Mozambique	Sharon Mills	CARE (01-06) HAI (02-07) SC (00-03)	Susan Youll Susan Youll Susan Youll

**CHILD SURVIVAL GRANTS PROGRAM – PORTFOLIO
FY 2003**

		WRC (99-03)	Sheila Lutjens
Nepal	Tom Hall	CARE (99-03) Plan (01-06) SC (99-03)	Susan Youll Susan Youll Susan Youll
Nicaragua	Sharon Mills	ADRA (01-06) CARE (02-07)† HOPE (02-06)	Susan Youll Susan Youll Sheila Lutjens
Peru	Sharon Mills	CARE (00-04) HOPE (00-03)	Susan Youll Sheila Lutjens
Philippines	Tom Hall	CRS (00-04) PSBI (99-03)	Sheila Lutjens Susan Youll
Rwanda	Sharon Mills	CWI (01-05) IRC (01-05) PSI (00-03) WRC (01-06)	Sheila Lutjens Sheila Lutjens Sheila Lutjens Sheila Lutjens
Senegal	Tom Hall	CCF (02-06)†	Sheila Lutjens
South Africa	Sharon Mills	MCDI (01-05) SAWSO (02-07) WVI (99-03)	Sheila Lutjens Susan Youll Sheila Lutjens
Tajikistan	Tom Hall	AKF (00-04) SC (02-07)†	Sheila Lutjens Susan Youll
Uganda	Sharon Mills	Africare (99-03)	Susan Youll
Uzbekistan	Tom Hall	CII (00-04) HOPE (99-03)	Sheila Lutjens Sheila Lutjens
Vietnam	Sheila Lutjens	SC (02-07)	Sheila Lutjens
Yemen	Tom Hall	ADRA (99-03)	Susan Youll
Zambia	Sharon Mills	ADRA (99-03) PCI (02-06)	Susan Youll Sheila Lutjens

† Cost Extension

‡ No-cost Extension

Tom Hall - 26 projects/16 countries (India-WVI ends 10/29/02)
 Sheila Lutjens - 9 projects/4 countries
 Sharon Mills - 26 projects/10 countries
 Susan Youll - 16 projects/5 countries

Project Directory

Office of Professional Development and Management Support

Director, Sharon Carney (Acting)

Cooperative Administrative Support Units (CASU) InterAgency Agreement

Cooperating Agency	Department of Treasury, FedSource-Los Angeles
Project Number	936-3070.07
Contract Number	PHN-P-00-00-0001-00
Duration	06/00-09/05
Geographic Scope	Worldwide

Purpose: To provide the Bureau for Global Health, field missions and Regional Bureaus with mid- to senior-level technical specialists in order to maintain proper technical leadership in the field of population, health and nutrition (PHN).

Description: As the Agency faces serious PHN technical staffing constraints, an alternative NDH mechanism was sought in order to be able to adapt very quickly to changing technical staffing needs, and to maintain the Bureau for Global Health's technical leadership in essential fields. To address this situation and after an extensive review of alternative hiring mechanisms, the Agency decided on the use of the CASU mechanism to provide the needed expertise. This mechanism provides for on-site institutional contractor staff for government operations and has been used throughout the Federal Government. In 2000, the Bureau for Global Health put into place an InterAgency Agreement with the Department of Treasury's FedSource-Los Angeles (formerly Franchise Business Activity-West). Institutional contractor staff are provided through their subcontractor, COMFORCE Technical Services.

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Health and Child Survival Fellows (HCSF) Program

Cooperating Agency	Johns Hopkins University (JHU)
Project Number	936-3098.03
Agreement Number	HRM-A-00-01-0001-00
Duration	01/01 - 01/06
Geographic Scope	Worldwide

Purpose: Identification, placement, and supervision of Health and Child Survival Fellows and University Affiliates in field assignments and USAID/Washington.

Description: This program identifies, places, and supervises junior and mid-level experts in field and USAID/W assignments that contribute to the career development and commitment to international health of the experts themselves, as well as to the Agency's health and child survival programs.

The program includes:

- A national secretariat at the Johns Hopkins University Institute for International Programs (JHU/IIP), responsible for management and administration of the program, ensuring the full and effective participation of a broad range of institutions and the selection of the most qualified and committed candidates as Fellows.
- A collaborating network of Schools of Public Health and Historically Black Schools of Medicine (HBCUs), which provides a roster of applications and advisors as a basis for recruitment of Fellows.

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Population Fellows Program (Michigan Fellows)

Cooperating Agency	University of Michigan
Project Number	936-3093.02
Agreement Number	HRN-A-00-00-00001-00
Duration	9/99-9/04
Geographic Scope	Worldwide

Purpose: To provide 1) international family planning and reproductive health programs in developing countries with professional technical expertise in family planning, reproductive health, and related areas, such as environment; 2) international training for early-career and a limited number of mid-career professionals through fellowships both in the U.S. and overseas; and 3) a forum for policymakers to discuss the links between population growth, environmental degradation and international security conflicts.

Description: This project provides private- and public-sector programs with the skills of fellows who are recent master's degree graduates in family planning/reproductive health and development-related fields. It simultaneously provides these entry-level professionals with valuable field experience and training. The technical assistance and training provided covers: data collection and analysis; policy formulation and implementation; communication and education; training; service delivery; and program design, implementation, and evaluation. Fellows are selected competitively on the basis of their academic and professional experience, and according to the skills required by the host institution. Fellows are placed with international agencies, local NGOs, and government organizations working to improve family planning, reproductive health, and population-environment programming in the developing world. The Fellowship term is 24 months. The programs also provide a limited amount of funding to support graduate student internships in international family planning.

Population-Environment Fellows: The Population-Environment Fellows Program has the same objectives as the Population Fellows Program. Population-Environment Fellows work primarily in the following areas: integrated community-based development programs; linked population-environment service delivery; buffer zone management; policy analysis and research of population-environment dynamics; and participatory rural analysis.

Minority Serving Institutions Initiative: This initiative works with students and faculty from Historically Black Colleges and Universities, Hispanic-Serving Institutions, and Tribal Colleges and Universities to increase the number of students from these institutions who pursue careers in international family planning and reproductive health. The centerpiece activity of the initiative is an internship program designed to prepare candidates for fellowships.

Environmental Change and Security Project (ECSP): This project is administered by the Smithsonian Institution's Woodrow Wilson Center. Through meetings, publications, and the activities of the Director, the ECSP explores a wide range of academic and policy-related topics involving the population-environment-security nexus. Through these activities, ECSP gains the attention and participation of policymakers, resulting in the consideration of population-environment-security issues in the broader context of U.S. foreign policy.

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Population Leaders Program (PLPII)

Cooperating Agency	Public Health Institute
Project Number	936-3099.01
Agreement Number	HRN-A-00-99-00012-00
Duration	7/99-7/04
Geographic Scope	Worldwide

Purpose: To improve management and leadership of selected family planning/reproductive health programs by: 1) increasing technical capacity within the PHN sector through the placement and support of Fellowships; 2) improving leadership and management practices of PHN professionals through non-training and training interventions; 3) improving work processes that will target individuals and teams.

Description: PLPII increases technical capacity by recruiting, placing, and supporting the professional development of 40 mid- to senior-level fellows in two-year assignments in GH, Regional Bureaus, Missions, and Regional Offices. PLP fellows advise program teams, provide technical assistance to funded programs, carry out evaluations, promote collaboration among USAID partners, conduct innovative research, and spearhead priority PHN initiatives, while completing a customized professional development plan. Fellowships are guided by a scope of work developed in collaboration with the host organization. PLPII also contributes to technical capacity development by supporting State-of-the-Art (SOTA) Technical workshops and technical updates that promote knowledge acquisition and exchange. Key Sessions are packaged in CD-ROM or web-based formats for dissemination to the field.

PLPII improves leadership and management practices of PHN professionals through training in core leadership disciplines, coaching, mentoring, and team building. Activities are designed to focus on skills development that will contribute to the performance of selected individuals and teams overall.

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Program Activities Support (PAS) Support Services Contract

Cooperating Agency	Pal-Tech, Inc.
Project Number	936-3070.03
Contract Number	HRN-C-00-98-00008-00
Duration	7/98-7/03
Geographic Scope	USAID/Washington

Purpose: To provide administrative, programmatic and logistic support services to the Bureau for Global Health (GH).

Description: Pal-Tech, Inc. provides administrative and project support services to the Bureau for Global Health (GH), thus, contributing to the achievement of GH and Agency goals and objectives. The six offices within the Bureau for Global Health have complementary objectives and activities: the office of Population and Reproductive Health (PRH), the office of Health and Infectious Diseases and Nutrition (HIDN), the office of HIV-AIDS (OHA), the office of Regional and Country Support (RCS), the office of Strategic Planning Budget Operations (SPBO), and the office of Professional Development Management Support (PDMS). This contract requires the contractor to provide administrative program and logistics support to GH staff. Support needs are driven by quantitative and qualitative performance measures, goals and objectives of GH, activities carried out in support of the Agency's Global Health programs, and routine assessments of support operations.

Special Restrictions: This project cannot take Field Support Funds.

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Technical Advisors in AIDS and Child Survival (TAACS)

Cooperating Agency	See Subprojects*
Project Number	936-5970
Contract Number	See Subprojects*
Duration	See Subprojects*
Geographic Scope	Worldwide

Purpose: Under this activity, CEDPA and the Office of Global Health of the Department of Health and Human Services administer the placement and backstopping of approximately 80 senior technical advisors in USAID Missions and USAID Washington to support activities in child survival, family planning and population, HIV/AIDS control and prevention, infectious disease control and prevention, and basic education.

Description: Both CEDPA and DHHS, through OGHA, will continue to backstop TAACS employed under this activity. Approximately 140 TAACS have been placed since the beginning of the activity in 1987 under a continuing provision in USAID's appropriations legislation. In fiscal year 1998, the legislation broadened the TAACS authority to include basic education, and the authority was expanded again in fiscal year 1999 to include other infectious diseases.

* See following page

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Office of International and Refugee Health/ Centers for Disease Control and Prevention (OIRH/CDC)

Cooperating Agency	OIRH/CDC
Subproject Number	936-5970.02
Agreement Number	HRN-P-00-98-00015-00
Duration	5/98 - 5/03 (extending)
Geographic Scope	Worldwide

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The Centre for Development and Population Activities (CEDPA)

Cooperating Agency	CEDPA
Subproject Numbers	936-5970.03 936-5970.04
Contract Numbers	HRN-C-00-98-00006-00 GPH-C-00-01-00006
Durations	05/98-12/04 09/01-09/06
Geographic Scope	Worldwide

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Support for Analysis and Research in Africa II (SARA II)

Cooperating Agency	Academy for Educational Development (AED)
Contract Number	AOT-C-00-99-00237-00
Duration	2000-2005
Geographic Scope	Sub-Saharan Africa region

Purpose: To provide strategic expertise, services and support to The Africa Bureau's Office of Sustainable Development (AFR/SD) to develop and promote adoption of policies and strategies for health and human resources development.

Description: The project supports AFR/SD in identifying social sector issues, developing analytical agenda and providing management assistance for analysis, dissemination and advocacy, promoting African partnerships, strengthening African capacity, and monitoring and evaluation.

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ANE Regional HIV/AIDS and Infectious Diseases Program

Cooperating Agency	The ANE Regional HIV/AIDS and Infectious Diseases Program operates through a variety of Bureau for Global Health Projects
Project Number	N/A
Contract Number	N/A
Duration	N/A
Geographic Scope	Asia/Near East region

Purpose: To support the design, implementation and monitoring of comprehensive HIV/AIDS and Infectious Diseases prevention, care and support activities throughout the region.

Description: ANE Regional HIV/AIDS funds are programmed largely through a variety of GH projects, mostly in the Office of HIV/AIDS. Regional HIV/AIDS and ID funds support activities in both presence and non-presence countries and expand the capacity of centrally funded and mission bilateral prevention, care and support projects and programs in the ANE region. The program supports innovative pilot projects that may be replicated throughout the region, cross-border activities, and initiatives designed to achieve multi-country impact.

The Bureau's HIV/AIDS and ID strategy has six primary objectives:

- Improve the response to HIV/AIDS and ID across national borders, within mobile populations not covered by national programs, and in USAID non-presence countries;
- Strengthen regional training programs to boost country capacity to design, implement, monitor and evaluate HIV/AIDS and Infectious Diseases programs
- Increase the capacity of local governments or non-governmental organizations (NGOs) to undertake behavioral and epidemiological surveillance and to use that information in policy and program development;
- Increase in the number of ANE assisted implementing agencies adopting best practices or new HIV/AIDS and ID services;
- Strengthen the capacity of communities and NGOs to provide HIV/AIDS and ID prevention and care and support services; and
- Collaborate with other USG agencies, donors, and international organizations in the response to HIV/AIDS and ID in the region.

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Health Partnerships Program

Cooperating Agency	American International Health Alliance (AIHA)
Project Number	180-0037 + 110-004
Grant Number	Multiple
Duration	1998-2003*
Geographic Scope	Newly Independent States and Central and Eastern Europe

Purpose: To establish and promote sustainable partnerships that foster more effective and efficient delivery of health services in the New Independent States (NIS) and Central and Eastern Europe (CEE).

Description: Operating under a series of cooperative agreements with USAID since 1992, the American International Health Alliance (AIHA) has created a highly successful partnership model to address local, national, and regional health care issues in the NIS of the former Soviet Union and the countries of CEE.

AIHA's network of partnerships promote sustainable change in health care systems throughout the CEE and NIS, while enhancing the medical skills of thousands of health care practitioners and improving the quality of care for patients in newly emerging democracies. The program also focuses on training policy makers and administrators at all levels of government to improve health care organizations and introduce market-oriented solutions. Special initiatives include women's health and infection control. Since 1992, AIHA has supported 100 partnerships involving health care providers and educators in 23 nations of the CEE and NIS

Historically, partnerships have generally addressed six key, interrelated elements of health care reform: a reorientation toward primary care; a closer alignment of personal health and public health efforts; the development of care management, the development of resource management; an increase in the quality and availability of information; and the promotion of democratic values.

* The cooperative agreements with AIHA may be extended to 2008.

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LAC Regional Health Priorities Strategic Objective

Cooperating Agency	Pan American Health Organization (PAHO)
SO Number	598-003
Grant Number	<i>See Grants on next page</i>
Duration	1996-2004
Geographic Scope	LAC region

Purpose: The purpose of this eight-year strategic objective is more effective delivery of selected health services and policy interventions.

Description: This Strategic Objective builds on successful efforts of prior projects with PAHO, supporting regional vaccination activities (598-0643 and 598-0786) as well as the LAC Regional Health and Nutrition Technical Services Support Project (598-0687). It provides assistance to LAC country programs through eight initiatives to strengthen quality and availability of selected health services: 1) vaccinations; 2) essential obstetric care and skilled attendance at birth; 3) integrated management of childhood illness; 4) interventions to reduce the threat of infectious diseases; 5) HIV/AIDS, 6) family planning, 7) malaria control in the Amazon basin, and 8) health sector reforms to increase equity of access to basic health care. Strategic approaches include: 1) improving service delivery; 2) improving surveillance systems; 3) increasing the sustainability of health programs; and 4) health management and financial reforms. Target countries are specific to each initiative; e.g., for vaccinations and integrated management of childhood illness, the nine LAC child survival emphasis countries receive more intense attention.

Implementation uses PAHO's recognized regional leadership and influence on policy and national programs and the cutting edge technical leadership of USAID's worldwide partners in these health technologies. USAID missions may supplement the grants to PAHO under this project to implement their programs. An IQC task order to LTG Associates Inc. Regional funds are transferred as field support to the following organizations: Center for Human Services, The Partnership for Child Health, TVT Associates, Abt Associates, Inc., Camp Dresser and McKee, Management Sciences for Health (MSH), Jorge Scientific Corporation, the International HIV/AIDS Alliance, the Centers for Disease Control, National Academy for Sciences, U.S. Pharmacopeia, Johns Hopkins University, the Centre for Development and Population Activities, and the Public Health Institute.

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Vaccination Initiative

Grant Number LAC-G-00-97-00008-00
Duration 1996-2004
Geographic Scope LAC Regional
CTO: Carol Dabbs
Technical Advisor: Jennifer Luna (202) 712-0537

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Integrated Management of Childhood Illness Initiative

Grant Number LAC-G-00-98-00012-00
Duration 1997-2004
Geographic Scope LAC Regional
CTO: Carol Dabbs
Technical Advisor: Jennifer Luna (202) 712-0537

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Also implemented by field support to the Partnership for Child Health

Maternal Mortality Initiative

Grant Number LAC-G-00-98-00012-00
Duration 1997-2004
Geographic Scope LAC Regional
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Health Sector Reform

Grant Number LAC-G-00-97-00007-00
Duration 1997-2004
Geographic Scope LAC Regional
CTO: David Piet
Technical Advisor: N/A

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Also implemented by field support to Management Sciences for Health, Abt Associates, the Center for Human Services, and a task order to LTG Associates

Infectious Disease Initiative

Grant Number LAC-G-00-99-00008-00
Duration 1999-2004
Geographic Scope LAC Regional
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Also implemented by field support to CDC, Camp Dresser and McKee, and Management Sciences for Health

Family Planning Initiative

Grant Number N/A
Duration 2001-2004
Geographic Scope LAC Regional
Technical Advisor: Lindsay Stewart (202) 712-4964

Implemented with field support by Family Health International, Population Council, and the Center for Human Services

HIV/AIDS Initiative

Grant Number N/A
Duration 2001-2004
Geographic Scope LAC Regional
Technical Advisor: Lindsay Stewart (202) 712-4964

Implemented with field support by: TvT, Inc.

Amazon Malaria Initiative

Grant Number LAC-G-00-99-00008-00
Duration 1999-2004
Geographic Scope LAC Regional
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Also implemented with field support to CDC, Management Sciences for Health, and U.S. Pharmacopeia

Vulnerable Children and War Victims Results Package: Victims of Torture Fund

DCHA

Cooperating Agency	N/A
Project Number	936-3102
Grant Number	N/A
Duration	N/A
Geographic Scope	Worldwide

Purpose: The Victims of Torture (VOT) Fund supports programs worldwide that assist in the rehabilitation of individuals who suffer from the physical and psychological effects of torture.

Description: The VOT Fund primarily supports programs that help heal the psychological and physical trauma caused by torture. Additionally, the fund recognizes that communities, along with survivors, need to heal and recover. To this end, the fund supports programs that affirm the dignity of the survivor by restoring his or her position as a functioning and contributing member of the family and the community.

The fund works through nongovernmental organizations (NGOs) overseas that (1) provide direct services to survivors, their families, and communities; (2) strengthen the capacity of country-based institutions in their delivery of services to survivors; and (3) increase the level of knowledge and understanding about the needs of torture victims.

Currently, the fund is supporting an estimated total of 45 treatment programs that attend to the medical, psychological, and social needs of torture survivors and their families. These programs include advocacy, training, technical assistance, and research.

The Fund is coordinated and supported by the Office of Democracy and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

As part of its oversight and managerial responsibilities for the Fund, DCHA maintains a technical assistance contract with CESSI. This contract provides technical assistance and support for field missions that are interested in developing or are actively managing activities under the Fund.

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Vulnerable Children and War Victims Results Package: Displaced Children and Orphans Fund

Cooperating Agency	N/A
Project Number	936-3102
Agreement Number	N/A
Duration	N/A
Geographic Scope	Worldwide

Purpose: The Displaced Children and Orphans Fund (DCOF) provides financial and technical assistance for community-based programs that assist vulnerable children who are separated or orphaned and without parental or adult supervision.

Description: This fund is coordinated and supported by the Office of Democracy and Governance, although most activities are implemented through USAID Mission - managed grants and agreements.

The major portion of these funds are used to support programs activities and provide technical assistance for three categories of children who are at “extreme risk,” including street children, war-affected children and children affected by HIV/AIDS.

DCOF currently supports programs in 12 countries.

As part of its oversight and managerial responsibilities for the Fund DCHA maintains a technical assistance contract with CESSI. This contract provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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Vulnerable Children and War Victims Results Package: The Patrick J. Leahy War Victims Fund

DCHA

Cooperating Agency	N/A
Project Number	936-3102
Agreement Number	N/A
Duration	N/A
Geographic Scope	Worldwide

Purpose: The Patrick J. Leahy War Victims Fund (LWVF) primarily provides assistance to programs that address the needs of civilians who suffer from physical disabilities as a result of war, including amputees who have lost limbs as a result of landmine accidents.

Description: The LWVF is mainly concerned with the provision of orthopedic services and devices to ensure unassisted mobility for civilian war victims. Assistance includes training and institutional capacity strengthening, facilities upgrading, materials provision, and support for national disabilities policy reform and public advocacy. In addition, programs include support for the social and economic reintegration of these survivors.

This fund is coordinated and supported by the Office of Democracy and Governance, although most activities are implemented through grants and agreements that are managed by USAID Missions.

The LWVF currently supports program activities in 13 countries.

As part of its oversight and managerial responsibilities for the Fund DCHA/DG maintains a technical assistance contract with Cessi. This contract provides technical assistance and support for field missions that are interested in developing or are actively managing field activities under the Fund.

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Bureau for Global Health Information Directories

Acronym List

A&A	Acquisitions and Assistance	ASEAN	Association of Southeast Asian Nations
AAAS	American Association for the Advancement of Sciences	AWACS	AID Worldwide Accounting and Control System
AACD	Activity Approval Completion Date	BASICS	Basic Support for Institutionalizing Child Survival
AAD	Activity Approval Document	BCC	Behavior Change Communication
AA/GH	Office of the Assistant Administrator for the Bureau for Global Health	BCI	Behavior Change Interventions
ACET	Advisory Council for Elimination of Tuberculosis	BHR	Bureau for Humanitarian Response (see DCHA)
ADB	Asian Development Bank	BPBS	Bureau Program and Budget Submission
ADS	Automated Directives System or Activity Data Sheet	BTEC	Business Transformation Executive Committee CA Cooperating Agency or Cooperative Agreement
AED	Academy for Educational Development	CARE	Cooperative for Assistance and Relief Everywhere, Inc.
AEEB	Assistance for Eastern Europe and the Baltic's Program Funds	CASU	Cooperative Administrative Support Units
AFDB	African Development Bank	CBJ	Congressional Budget Justification
AFR	Africa Region or Bureau for Africa	CCH	Community and Child Health
AIDS	Acquired Immunodeficiency Syndrome	CCP	Central Contraceptive Procurement
AIDSCAP	Acquired Immunodeficiency Syndrome Control and Prevention Program	CDC	Centers for Disease Control and Prevention
AIDSMARK	AIDS Social Marketing	CDD	Control of Diarrheal Disease
AIHA	American International Health Alliance	CDIE	Center for Development Information and Evaluation
AIMI	African Integrated Malaria Initiative	CDO	Cooperative Development Organization
AIS	Activity Information Sheets	CEDPA	Center for Development and Population Activities
AMR	Antimicrobial Resistance	CEE	Central and Eastern Europe
ANE	Asia and Near East Region or Bureau for Asia and Near East	CFA	African Financial Community
APAC	AIDS Prevention and Control	CH/N	Child Health and Nutrition
APHA	American Public Health Association	CHS	Child Health and Survival or Center for Health Services
APP	Agency Performance Plan	CI	Conservation International
APR	Agency Performance Report	CIB	Contract Information Bulletin
APUA	Alliance for the Prudent Use of Antibiotics	CIDA	Canadian International Development Agency
ARCH	Applied Research for Child Health	CIF	Capital Investment Fund
ARI	Acute Respiratory Infection		
ARV	Anti-retroviral		

Information - Acronym List

CIMS	Contract Information Management System	E&E	Europe and Eurasia Region or Bureau for Europe and Eurasia
CMS	Commercial Market Strategies	EGAD	Economic Growth and Agricultural Development (now part of EGAT)
CN	Congressional Notification	EGAT	Bureau for Economic Growth, Agriculture and Trade
CO	Contracting Officer	EGPAF	Elisabeth Glaser Pediatric AIDS Foundation
COHC	Centers for Health Communication	EH	Environmental Health
CP	Congressional Presentation	EHP	Environmental Health Project
CPP	Comprehensive Postpartum Centers	ENI	Europe and Newly Independent States (see E&E)
CPR	Contraceptive Prevalence Rate	ENV	Environment Center (now part of EGAT)
CRS	Catholic Relief Services	EOC	Emergency Obstetric Care
CS	Child Survival	EPI	Expanded Program on Immunization
CS	Contraceptive Security	ERID	Emerging and Re-emerging Infectious Diseases
CSD	Child Survival and Disease Programs Fund (see CSH)	ESF	Economic Support Fund
CSH	Child Survival and Health Programs Fund	EU	European Union
CSL	Commodities Security and Logistics Division (PRH)	EWC	East-West Center
CSM	Contraceptive Social Marketing	FAA	Foreign Assistance Act
CSW	Commercial Sex Workers	FANta	Food and Nutrition Technical Assistance
CTO	Cognizant Technical Officer	FAO	Food and Agriculture Organization
CTR	Contraceptive Technology Research	FAR	Federal Acquisition Regulations
CY	Calendar Year	FDA	Food and Drug Administration
CYP	Couple Year's Protection	FFP	Food for Peace
DA	Development Assistance Program Funds	FGC	Female Genital Cutting
DAI	Development Alternatives International	FHI	Family Health International
DALY	Disability Adjusted Life Year	FM	Office of Financial Management (see M/FM)
DART	Disaster Assistance Response Team	FOIA	Freedom of Information Act
DCA	Development Credit Authority	FP	Family Planning
DCHA	Bureau for Democracy, Conflict, and Humanitarian Assistance	FP/RH	Family Planning/Reproductive Health
DCOF	Displaced Children and Orphans Fund	FS	Field Support
DD	Diarrheal Disease	FSA	Freedom Support Act
DEVTA	Deworming and Enhanced Vitamin A	FSI	Foreign Service Institute
DFA	Development Fund for Africa	FSN	Foreign Service National
DFID	Department For International Development (UK)	FTE	Full-time Equivalent
DG	Democracy and Governance	FY	Fiscal Year
DH	U.S. Government Direct Hire	G	Global Bureau (see GH, EGAT, and DCHA)
DHE	Direct-Hire Equivalent	GAIN	Global Alliance for Improved Nutrition
DHS	Demographic and Health Survey	GAO	General Accounting Office
DOTS	Directly Observed Treatment, Short Course	GAVI	Global Alliance for Vaccines and Immunization
DP	Development Planning Office	GC	General Counsel
DPT	Diphtheria, Pertussis and Tetanus	GDA	Global Development Alliance
		GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
		GH	Bureau for Global Health
		GHAII	Greater Horn of Africa Initiative

GIS	Geographic Information System	INCLEN	International Clinical Epidemiology Network
G/PHNC	Global Bureau/ Population, Health and Nutrition Center (see GH)	IND	Investigational New Drug
GPRA	Government Performance and Results Act	INFO	Information and Knowledge for Optimal Health Project
GSA	General Services Administration	INRUD	International Network for the Rational Use of Drugs
GTZ	German development corporation	IO	Implementing Organization
HCD	Human Capacity Development	IOM	Institute of Medicine
HCP	Health Communication Partnership Project	IPA	Interagency Personnel Agreement
HG	Host Government	IPPF	International Planned Parenthood Federation
HHS	Department of Health and Human Services	IQC	Indefinite Quantity Contract
HiB	Hemophilus Influenza Type B	IR	Intermediate Result
HIDN	Office of Health, Infectious Diseases and Nutrition	IRC	International Rescue Committee
HIV	Human Immunodeficiency Virus	IS	Implementation Support Division (OHA)
HKI	Helen Keller International	ISPO	International Society for Prosthetics and Orthotics
HMIS	Health Management Information System	ISTI	International Sciences and Technology Institute
HMO	Health Maintenance Organization	IT	Information Technology
HPSP	Health Policy Support Program	ITN	Insecticide Treated Nets
HS	Health Systems Division (HIDN)	IUATLD	International Union Against Tuberculosis and Lung Disease
IAA	Interagency Agreement	IUD	Intrauterine Device
IAVI	International AIDS Vaccine Initiative	JHUCCP	Johns Hopkins University Center for Communications Programs
IBRD	International Bank for Reconstruction and Development (World Bank)	JHUCS	Johns Hopkins University Child Survival Fellows Program
ICASS	International Cooperative Administrative Support Services	JICA	Japanese International Cooperation Agency
ICDDR/B	International Center for Diarrheal Disease Research/Bangladesh	JSI	John Snow Inc.
ICPD	International Conference on Population and Development	LAC	Latin America and the Caribbean Region or Bureau for Latin America and the Caribbean
ICRC	International Committee of the Red Cross	LDC	Less (or Least) Developed Country
ICRW	International Center for Research on Women	LIFE	Leadership and Investments in Fighting the Epidemic Initiative
ICS	Immunochromatographic Strip (for testing for TB)	LOP	Life of Project
ID	Infectious Diseases or Infectious Diseases Division (HIDN)	LPA	Bureau for Legislative and Public Affairs
IDB	Inter-American Development Bank	LWA	Leader with Associate Award
IDI	International Development Intern	M	Bureau for Management
IDP	Internally Displaced Person/People	MAARD	Modified Acquisition and Assistance Request Document
IEC	Information, Education, and Communication	MAQ	Maximizing Access and Quality
IFPS	Innovations in Family Planning Services		
IG	Office of the Inspector General		
IMCI	Integrated Management of Childhood Illnesses		
IMPACT	Implementing AIDS Prevention and Control Activities		
IMR	Infant Mortality Rate		

Information - Acronym List

MCH	Maternal and Child Health or Maternal and Child Health Division (HIDN)	OAS	Organization of American States
MDB	Multilateral Development Bank	OB	Obstetric
M&E	Monitoring & Evaluation	OC	Oral Contraceptive
MEDS	Monitoring, Evaluation and Design Support Activity	OCP	Onchocerciasis Control Program
MENA	Middle East and North	OE	Operating Expense
Africa		OFDA	Office of Foreign Disaster Assistance
M/FM	Office of Financial Management (M)	OHA	Office of HIV/AIDS
MH	Maternal Health	OMB	Office of Management and Budget
MIS	Management Information System	OMNI	Opportunities for Micronutrient Interventions Project
M&L	Management and Leadership	OP	Office of Procurement (Management Bureau)
MMR	Maternal Mortality Ratio	OPS	Operations Division (SPBO)
MNH	Maternal and Neonatal Health	OPV	Oral Polio Vaccine
MOH	Ministry of Health	OR	Operations Research
MOPH	Ministry of Public Health	ORS	Oral Rehydration Salts
MOST	Micronutrient Operational Strategies and Technologies	ORT	Oral Rehydration Therapy
MOU	Memorandum of Understanding	OTI	Office of Transition Initiatives
MSH	Management Sciences for Health	OYB	Operational Year Budget
MTCT	Mother to Child Transmission (of HIV/AIDS)	PAA	Population Association of America
MVDP	Malaria Vaccine Development Program	PACD	Project Assistance Completion Date
MVI	Malaria Vaccine Initiative	PACT	Private Agencies Cooperating Together
NACP	National AIDS Control Program	PAHO	Pan American Health Organization
NAPCP and	National AIDS Prevention Control Program	PASA	Participating Agency Service Agreement
NDH	Non-Direct Hire	PATH	Programs for Appropriate Technologies in Health
NEP	New Entry Professional	PCV	Peace Corps Volunteer
NGO	Non-Governmental Organization	PDC	Policy Development Coordination
NHA	National Health Accounts	PDMS	Office of Professional Development and Management Support
NID	National Immunization Days	PEC	Policy, Evaluation and Communication Division (PRH)
NIH	National Institutes of Health	PEI	Polio Eradication Initiative
NIS	Newly Independent States Program Funds	PHC	Primary Health Care
NMRC	Navy Medical Research Center	PHN	Population, Health, and Nutrition
NMS	New Management System	PHNC	Population Health and Nutrition Center (now the Bureau for Global Health)
NPR	National Performance Review	PHNIP	Population, Health and Nutrition Information Project
NUT	Nutrition Division (HIDN)	PHR	Partnership for Health Reform
		PIO	Public International Organization
		PL	Public Law
		PLP	Population Leadership Program
		PLWHA	People Living with HIV/AIDS
		PMP	Performance Management Plan
		PNFPP	Philippines National Family Planning Program
		POPIN	United Nations Population Information Network

PPC	Bureau for Policy and Program Coordination	SPER	Strategic Planning, Evaluation and Reporting Division (OHA)
PPC/B	Office of Budget, Bureau for Policy and Program Coordination	SpO	Special Objective
PRB	Population Reference Bureau	SPU	Strategic Planning Unit
PRH	Office of Population and Reproductive Health	SSO	Strategic Support Objective
PRIME	Primary Providers' Training and Education in Reproductive Health	STD	Sexually Transmitted Disease
PROWID	Promoting Women In Development	STI	Sexually Transmitted Infections
PSC	Personal Service Contract	StopTB	Stop Tuberculosis
PVC	Office of Private Voluntary Cooperation	TA	Technical Assistance
PVO	Private Voluntary Organization	TAACS	Technical Advisor in AIDS and Child Survival
QA	Quality Assurance	TASC	Technical Assistance and Support Activity
R4	Results Review and Resource Requirement (now Annual Report)	TB	Tuberculosis
RBM	Roll Back Malaria	TBA	Traditional Birth Attendant
RCS	Office of Regional and Country Support	TBD	To Be Determined
REDSO	Regional Economic Development Support Office	TEC	Total Estimated Cost
RH	Reproductive Health	TFGI	The Futures Group International
RH/PHC	Reproductive and Primary Health Care	TFR	Total Fertility Rate
RIF	Reduction in Force	TLR	Technical Leadership and Research Division (OHA)
RP	Results Package (see AAD)	TN	Technical Notification
RPM	Rational Pharmaceutical Management	U.S.	United States
RRB	Ronald Reagan Building	U5MR	Under 5 Mortality Rate
R&RS	Research and Reference Service	UN	United Nations
RSSA	Resource Support Services Agreement	UNAIDS	Joint United Nations Programme on HIV/AIDS
RTU	Research, Technology and Utilization Division (PRH)	UNDP	United Nations Development Programme
SADC	Southern Africa Development Community	UNFPA	United Nations Population Fund
SAI	Special Assistance Initiative	UNICEF	United Nations Children's Fund
SCF	Save the Children Foundation	USAID	United States Agency for International Development
SCT	Sewage Collection and Treatment Systems	USAID/W	USAID/Washington
SDI	Service Delivery Improvement Division (PRH)	USDH	United States Direct Hire (see DH)
SEED	Support for East European Democracy (see AEEB)	USG	United States Government
SM	Safe Motherhood	USP	U.S. Pharmacopeial Convention
SNID	Sub-National Immunization Days	VAD	Vitamin A Deficiency
SO	Strategic Objective	VB	Vector Born Disease
SOTA	State of the Art	VCT	Voluntary HIV Counseling and Testing
SPA	Service Provision Assessment	VITA	Vitamin A Initiative
SPB	Strategic Planning and Budgeting Division (SPBO)	VOA	Voice of American
SPBO	Office of Strategic Planning, Budgeting and Operations	VVM	Vaccine Vial Monitor
		WARP	West Africa Regional Program
		WFP	World Food Program
		WHO	World Health Organization
		WID	Office of Women in Development (EGAT Bureau)
		WRAIR	Walter Reed Army Institute of Research
		YARH	Young Adult Reproductive Health

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Madagascar	(Title/Position) DOS/USAID 2040 Antananarivo Place Washington., D.C. 20521-2040	USAID/Madagascar Immeuble Vonisoa III Avenue Docteur Ravohangy Anosy, Antananarivo, 101 Madagascar
Malawi	(Title/Position) DOS/USAID 2280 Lilongwe Place Washington., D.C. 20521-2280	USAID/Malawi NICO House- 1 st floor Lilongwe 3, Malawi

Mission	Official Mail/Pouch (DOS/USAID internal use)	Location/ Commercial Courier
Mali	(Title/Position) DOS/USAID 2050 Bamako Place Washington., D.C. 20521-2050	USAID/Mali Immeuble Dotembougou Rue Rayond Poincarre & Rue 319 Quartier du Fleuve, Bamako, Mali
Mozambique	(Title/Position) DOS/USAID 2330 Maputo Place Washington., D.C. 20521-2330	USAID/Mozambique JAT Complex Rua 1231, No. 41 Bairro Central "C" Maputo, Mozambique
Namibia	(Title/Position) DOS/USAID 2540 Windhoek Place Washington., D.C. 20521-2540	USAID/Namibia 6 th floor, Southern Life Tower Post Street Mall Windhoek, Namibia
Nigeria	(Title/Position) DOS/USAID 8320 Abuja Place Washington., D.C. 20521-8320	USAID/Nigeria Metro Plaza, 3 rd floor Plot 992, Zakaria Maimalari St. Central Business District PMB 519, Garki Abuja, Nigeria
REDSO/ESA	REDSO/ESA USAID/Nairobi Unit # 64102 APO AE 09831-4102	USAID Offices- REDSO/ESA Kasarani Road Nairobi, Kenya
RHAP	(Title/Position) DOS/USAID 9330 Pretoria Place Washington., D.C. 20521-9330	USAID 100 Totius Street Groenkloof X5 P.O.43 Pretoria Pretoria 0027, South Africa
Rwanda	(Title/Position) DOS/USAID 2210 Kigali Place Washington., D.C. 20521-2210	USAID Office Avenue Paul VI B.P.2848 Kigali, Rwanda
Senegal	(Title/Position) DOS/USAID 2130 Dakar Place Washington., D.C. 20521-2130	USAID/Dakar, Senegal Hotel Ngor Diarama Almadies Dakar, Senegal
Sierra Leone	(Title/Position) USAID Freetown 2160 Freetown Place Washington., D.C. 20521-2160	USAID/ Freetown Department of State WDC, 20523-0001
South Africa	(Title/Position) DOS/USAID 9330 Pretoria Place Washington., D.C. 20521-9330	USAID 100 Totius Street Groenkloof X5 P.O.43 Pretoria Pretoria 0027, South Africa
Sudan	(Title/Position) DOS/USAID 2200 Khartoum Place Washington., D.C. 20521-2200	USAID/Khartoum C/O American Embassy Khartoum, Sudan

Mission	Official Mail/Pouch (DOS/USAID internal use)	Location/ Commercial Courier
Tanzania	(Title/Position) DOS/USAID 2140 Dar es Salaam Place Washington., D.C. 20521-2140	USAID/Tanzania C/O US Embassy 686 Old Bagomoyo Road Dar es Salaam, Tanzania
Uganda	(Title/Position) DOS/USAID 2190 Kampala Place Washington., D.C. 20521-2190	C/O American Embassy 42 Nakasero Road Kampala, Uganda
WARP	(Title/Position) DOS/USAID 2050 Bamako Place Washington., D.C. 20521-2050	USAID/Mali (WARP) Immeuble Dotembougou Rue Rayond Poincarre & Rue 319 Quartier du Fleuve, Bamako, Mali
Zambia	(Title/Position) DOS/USAID 2310 Lusaka Place Washington., D.C. 20521-2310	USAID Mission 351 Independence Ave. Lusaka, Zambia
Zimbabwe	(Title/Position) DOS/USAID 2180 Harare Place Washington., D.C. 20521-2180	USAID/Zimbabwe 1 Pascoe Ave. Belgravia Harare, Zimbabwe

~ ASIA and THE NEAR EAST ~

Afghanistan	(Title/Position) DOS/USAID 6180 Kabul Place Washington., D.C. 20521-6180	USAID C/O American Embassy Sadak-e Massoud-e Bozurg (Sadak-e Maidan-e Hava'ii), Kabul
Bangladesh	(Title/Position) DOS/USAID 6120 Dhaka Place Washington., D.C. 20521-6120	USAID American Embassy Madani Avenue, Baidhara Dhaka, Bangladesh
Cambodia	(Office/Name) American Embassy/USAID Box P APO AP 96546	USAID/Cambodia No. 18 Mongkul Eam Street #228 Phnom Penh, Cambodia
Egypt	(Office/Name) USAID Unit# 64902 APO AE 09839-4902	USAID Office Building Plot 1/A off El Liselki Street New Maadi Cairo, Egypt
India	(Title/Position) DOS/USAID 9000 New Delhi Place Washington., D.C. 20521-9000	USAID/American Embassy Shantipath, Chanakyapuri New Delhi 110 021 India
Indonesia	(Office/Name) American Embassy/USAID Box# 4 APO AP 96520	USAID/Indonesia C/O American Embassy Jl. Medan Merdeka Selatan 3-5 Jakarta 10110, Indonesia
Jordan	(Office/Name) USAID/Amman Unit# 70206 APO AE 09892-0206	USAID Office ATTN: (name of person) C/O American Embassy, Abdoun Amman, Jordan

Mission	Official Mail/Pouch (DOS/USAID internal use)	Location/ Commercial Courier
Morocco	(Office/Name) American Embassy/USAID PSC 74 Box 022 APO AE 09718	USAID 10, Avenue Mehdi Benbarka, Souissi Rabat, Morocco
Nepal	(Title/Position) DOS/USAID 6190 Kathmandu Place Washington., D.C. 20521-6190	USAID/Nepal Rabi Bhawan, Kalimati Durbar Kathmandu, Nepal
Pakistan	(Title/Position) DOS/USAID 8100 Islamabad Place Washington., D.C. 20521-8100	American Embassy Islamabad Ramna 5 Diplomatic Enclave Islamabad, Pakistan
Philippines	(Office/Name) USAID/Manila FPO AP 96515	USAID 8 th floor, PNB Fincial Center Roxas Blvd. 1308 Pasay City, Philippines
Vietnam	(Title/Position) US Embassy- Hanoi PSC 461, Box 400 FPO AP 96521-0002	USAID Vietnam Office Rose Garden Tower 6 Ngoc Khanh Street Hanoi, Vietnam
West Bank/Gaza	USAID/West Bank Gaza American Embassy- Tel Aviv Unit# 7228 APO AE 09830	USAID/West Bank Gaza 25 HaMared Street 10 th floor Tel Aviv, Israel
Yemen	USAID/Amman Unit # 70206 APO AE 09892-0206	American Embassy P.O. Box 354 Amman 11118 Jordan
Regional HIV/AIDS Office	(Title/Position) DOS/USAID 7200 Bangkok Place Washington., D.C. 20521-7200	Regional HIV/AIDS Office Diethelm Towersa A, Ste. 304 Wireless Road, Bangkok 10330, Thailand

~ EUROPE and EURASIA ~

Albania	(Title/Position) DOS/USAID 9510 Tirana Place Washington., D.C. 20521-9510	USAID/American Embassy 103 Rruga e Elbasanit Tirana, Albania
Armenia	(Title/Position) DOS/USAID 7020 Yerevan Place Washington., D.C. 20521-7020	USAID/Yerevan #18 Baghramian Street Yerevan 375019, Armenia
Baltics	(Title/Position) DOS/USAID 5270 Budapest Place Washington., D.C. 20521-5270	USAID/Regional Service Center Bank Center, Granit Tower Szabadsag ter 7-8 1944 Budapest, Hungary
Bosnia	(Title/Position) DOS/USAID 7130 Sarajevo Place Washington., D.C. 20521-7130	USAID/Bosnia-Herzegovina American Embassy-Sarajevo Obala Kulina Bana 1 Sarajevo, Bosnia-Herzegovina
Bulgaria	(Title/Position) DOS/USAID 5740 Sofia Place Washington., D.C. 20521-5740	USAID C/O American Embassy 1 Suborna Street Sofia- 1000, Bulgaria

Information - Mission Address List

Mission	Official Mail/Pouch (DOS/USAID internal use)	Location/ Commercial Courier
Caucasus Region	(Title/Position) DOS/USAID 7060 Tbilisi Place Washington., D.C. 20521-7060	USAID/Caucasus Tbilisi 5 th floor 20 Telavi Street Tbilisi, 380036
Central Asian Republics Region	(Title/Position) DOS/USAID 7030 Almaty Place Washington., D.C. 20521-7030	USAID/CAR/Almaty Park Palace Building 41 Kazibek bi street Almaty, 480100 Republic of Kazakhstan
Croatia	(Title/Position) DOS/USAID 5080 Zagreb Place Washington., D.C. 20521-5080	USAID A. bon Humboltova 4 Zagreb, Croatia
Federal Republic of Yugoslavia	(Title/Position) DOS/USAID 5070 Belgrade Place Washington., D.C. 20521-5070	American Embassy USAID Kneza Milosa 50 11000 Belgrade, FRY* *Mark as diplomatic shipment
Hungary	(Title/Position) DOS/USAID 5270 Budapest Place Washington., D.C. 20521-5270	USAID/Regional Service Center Bank Center, Granit Tower Szabadsag ter 7-8 1944 Budapest, Hungary
Kosovo	(Title/Position) DOS/USAID 9520 Pristina Place Washington., D.C. 20521-9520	(Name of Individual) USAID/Kosovo Dragodan 2 House 1 38000 Pristina, Kosovo
Macedonia	(Title/Position) DOS/USAID 7120 Skopje Place Washington., D.C. 20521-7120	USAID Jurij Gargarin 15/3 1000 Skopje FYR Macedonia
Romania	(Title/Position) DOS/USAID 5260 Bucharest Place Washington., D.C. 20521-5260	USAID/Romania Blvd. Natiunilor Unite no. 1 Block 108A, "Gemenii SITRATCO" Floors 6-9, Sector 5 Bucharest, Romania
Russia	(Office/Name) American Embassy/USAID Moscow PSC 77 APO AE 09721	American Embassy/Moscow USAID/Moscow Novinskiy Bulvar, 19/23 121099 Moscow, Russia
West/NIS Region	(Title/Position) DOS/USAID 5850 Kiev Place Washington., D.C. 20521-5850	USAID/Kiev 19 Nizhnyi Val sr. Kiev 254071, Ukraine

~ LATIN AMERICA and the CARIBBEAN ~

Bolivia	(Office/Name) American Embassy/USAID Unit # 3914 APO AA 34032	USAID/Bolivia 109 Calle 9 Obrajes La Paz, Bolivia
Brazil	(Office/Name) American Embassy/USAID Unit # 350 APO AA 34030-7500	USAID/American Embassy SES Avenida das Nacoes Quadra 801 Lote 3 Brasilia – DF – 70403-900, Brazil

Information - Mission Address List

Mission	Official Mail/Pouch (DOS/USAID internal use)	Location/ Commercial Courier
Dominican Republic	(Office/Name) USAID/Santo Domingo Unit # 5541 APO AA 34041-5541	American Embassy USAID/Santo Domingo Leopoldo Navarro 12 Santo Domingo, Dominican Republic
El Salvador	(Office/Name) Unit # 3110 APO AA 34023	USAID/El Salvador Urbanizacion y Boulevard Santa Elena Antiguo Cuscatlan La Libertad El Salvador, C.A.
Guatemala	(Office/Name) USAID/Guatemala Unit # 3323 APO AA 34024	1 Calle 7-66, Zone 9 01009 Guatemala Guatemala, C.A.
Guyana	(Title/Position) DOS/USAID 3170 Georgetown Place Washington., D.C. 20521-3170	USAID/Guyana C/O US Embassy 100 Young and Duke Streets Kingston, Georgetown, Guyana
Haiti	(Title/Position) DOS/USAID 3400 Port Au Prince Place Washington., D.C. 20521-3400	USAID #17 Harry Truman Blvd. Port-Au-Prince, Haiti
Honduras	(Title/Position) USAID/Tegucigalpa Unit # 2927 APO AA 34022	USAID/Honduras Avenida La Paz Prente Embajada Americana Tegucigalpa, D.C., Honduras
Jamaica	(Title/Position) DOS/USAID 3210 Kingston Place Washington., D.C. 20521-3210	USAID/Kingston 2 Haining Road Kingston 5, Jamaica
Mexico	(Title/Position) DOS/USAID 8700 Mexico Place Washington., D.C. 20521-8700	USAID/Mexico Paseo de la Reforma No. 305 Col. Cuauhtemoc 06500-Mexico D.F., Mexico
Nicaragua	(Office/Name) American Embassy/Managua/USAID Unit # 2712 Box# 9 APO AA 34021	USAID C/O American Embassy Managua, Nicaragua
Paraguay	(Office/Name) USAID/Asuncion Unit # 4734 APO AA 34036	USAID/Asuncion Juan de Salazar C/ Avda. Artigas Asuncion, Paraguay
Peru	(Office/Name) American Embassy/USAID Unit # 3760 APO AA 34031	USAID/Lima Av. La Encalada Monterrico Lima, Peru
Central America HIV/AIDS Office	(Office/Name) American Embassy/Guatemala Unit # 3324 APO AA 34024	USAID/G-CAP 1 Calle 7-66, Zone 9 Edificio Plaza Uno 01009 Guatemala
Caribbean Regional Office	(Title/Position) DOS/USAID 3210 Kingston Place Washington., D.C. 20521-3210	USAID/Kingston 2 Haining Road Kingston 5, Jamaica

Bureau for Global Health Information Directories

Partner Organizations

Abt Associates, Inc.
 Hampden Square
 4800 Montgomery Lane, Suite 600
 Bethesda, MD 20814-5341
 Telephone: (301) 913-0500
 Fax: (301) 652-3618
<http://www.phrproject.com>

Academy for Educational Development (AED)
 1825 Connecticut Avenue, NW
 Washington, DC 20009-5721
 Telephone: (202) 884-8000
 Fax: (202) 884-8400
<http://www.aed.org>
<http://www.fanta.org>
<http://www.linkagesproject.org>

Camp Dresser & McKee International Inc.
 EHP Operations Center
 1611 North Kent Street, Suite 300
 Arlington, VA 22209
 Telephone: (703) 247-8730
 Fax: (703) 243-9004
<http://www.ehproject.org>

Adventist Development and Relief Agency
 12501 Old Columbia Pike
 Silver Spring, MD 20904-6600
 Telephone: (301) 680-6380
 Fax: (301) 680-6370
<http://www.adra.org>

Catholic Relief Services (CRS)
 209 W. Fayette Street
 Baltimore, MD 21201-3443
 Telephone: (410) 625-2220
 Fax: (410) 234-3178

Africare
 440 R Street, NW
 Washington, DC 20001
 Telephone: (202) 462-3614
 Fax: (202) 387-1034
<http://www.africare.org>

Centers for Disease Control & Prevention (CDC) (CDC/InfoTech)
 1600 Clifton Road, NE, MS C-08
 Atlanta, GA 30333
 Telephone: (404) 639-2234
 Fax: (404) 639-2230
<http://www.cdc.gov>

Aga Khan Foundation
 1901 L Street, NW, Suite 700
 Washington, DC 20036
 Telephone: (202) 293-2537

Office of Global Health
Centers for Disease Control & Prevention (CDC)
 4770 Buford Highway, NE
 Atlanta, GA 30341
 Telephone: (770) 488-5212 (*Environmental Health*)
 Telephone: (770) 488-1195 (*TAACS*)
 Fax: (770) 488-1004 (*Environmental Health*)
 Fax: (770) 488-1318 (*TAACS*)
<http://www.cdc.gov>

American International Health Alliance (AIHA)
 1212 New York Ave., NW
 Washington, DC 20005
 Telephone: (202) 789-1136
 Fax: (202) 789-1277
<http://www.aiha.com>

Andean Rural Health Care
 P.O. Box 216 (299 Lakeshore Drive)
 Lake Junaluska, NC 28745-0216
 Telephone: (828) 452-3544
 Fax: (828) 452-7790

Division of Reproductive Health
Centers for Disease Control & Prevention (CDC) (Measure/CDC)
 4770 Buford Highway, NE, MS K-22
 Atlanta, GA 30341
 Telephone: (770) 488-6200
 Fax: (770) 488-6242
<http://www.cdc.gov>

Ani & Narod Memorial Fund
 300 Park Avenue, 17th Floor
 New York, NY 10022
 Telephone: (212) 935-5242
 Fax: (212) 202-6350
<http://www.ani.org>

The Centre for Development and Population Activities (CEDPA)

1400 16th Street, NW, Suite 200
Washington, DC 20036
Telephone: (202) 667-1142
Fax: (202) 332-4496
<http://www.cedpa.org>

Christian Children's Fund, Inc. (CCF)

2821 Emerywood Parkway
Richmond, VA 23261-6484
Telephone: (804) 756-2700
Fax: (804) 756-2718
<http://www.christianchildrensfund.org>

Clapp and Mayne, Inc.

8401 Colesville Road, Suite 425
Silver Spring, MD 20910
Telephone: (301) 495-9572
Fax: (301) 495-9577
<http://www.cmusa.com>

Concern Worldwide US, Inc.

104 East 40th Street, Room 903
New York, NY 10016
Telephone: (212) 557-8000
Fax: (212) 557-8004

Cooperative for Assistance and Relief Everywhere (CARE)

151 Ellis Street, NE
Atlanta, GA 30303-2439
Telephone: (404) 681-2552
Fax: (404) 577-1205
<http://www.care.org>

Conservation International

1919 M Street, NW, Suite 600
Washington, DC 20036
Telephone: (202) 912-1000
Fax: (202) 912-1030

Counterpart International, Inc.

1200 18th Street, NW, Suite 1100
Washington, DC 20008
Telephone/Fax: (202) 296-9676

Deloitte Touche Tohmatsu (CMS)

1001 G Street, NW
Suite 400 West
Washington, DC 20037
Telephone: (202) 879-4961
Fax: (202) 220-2189
<http://www.deloitte.com>
<http://www.cmsproject.com/>

**Office of International and Refugee Health
Department of Health and Human
Services (OIRH/DHHS)**

Parklawn Building
5600 Fishers Lane, Room 90
Rockville, MD 20857
Telephone: (301) 443-1774
Fax: (301) 443-0742
<http://www.dhhs.gov>

Development Associates, Inc. (DAI)

1730 North Lynn Street
Arlington, VA 22209
Telephone: (703) 276-0677
Fax: (703) 276-0432

CONRAD

Eastern Virginia Medical School (EVMS)

1611 North Kent Street, Suite 806
Arlington, VA 22209
Telephone: (703) 524-4744
Fax: (703) 524-4770
<http://www.conrad.org/>

EngenderHealth

440 Ninth Avenue
New York, NY 10001
Telephone: (212) 561-8000
Fax: (212) 779-9489
www.avsc.org

Esperanca, Inc.

1911 West Earl Drive
Phoenix, AZ 85015
Telephone: (602) 252-7772
Fax: (602) 340-9197

**Family Health International (FHI)
(Contraceptive Technology)**

P.O. Box 13950
Research Triangle Park, NC 27709
Telephone: (919) 544-7040
Fax: (919) 544-7261
<http://www.fhi.org/>

**Family Health International (FHI)
(Impact, YouthNet)**

2111 Wilson Boulevard, 3rd Floor
Arlington, VA 22201
Telephone: (703) 516-9779
Fax: (703) 516-9781
<http://www.fhi.org>

Foundation of Compassionate American Samaritans

P.O. Box 428760
Cincinnati, OH 45242-8760
Telephone: (513) 621-5300
Fax: (513) 621-5307

The Futures Group International

1050 17th Street, NW, Suite 1000
Washington, DC 20036
Telephone: (202) 775-9680
Fax: (202) 775-9694
<http://www.tfgi.com/>

**Institute for Reproductive Health
Georgetown University Medical Center**

4301 Connecticut Ave, NW, Suite 310
Washington, DC 20008
Telephone: (202) 687-1392
Fax: (202) 687-6846
<http://www.georgetown.edu>

Global Health Council (GHC)

1701 K Street, NW, Suite 600
Washington, DC 20006
Telephone: (202) 833-5900
Fax: (202) 833-0075
<http://www.globalhealthcouncil.org/>

Harvard Institute for International Development (HIID)

Harvard University (*CHR: ARCH*)
Health Office
14 Story Street
Cambridge, MA 02138
Telephone: (617) 495-9791
Fax: (617) 495-9706
<http://www.hiid.harvard.edu>
<http://ih.jhsph.edu/chr/chr.htm>

**Harvard School of Public Health
Harvard University** (*Data for Decision Making*)

665 Huntington Avenue
Boston, MA 02115
Telephone: (617) 432-4620
Fax: (617) 432-2181
<http://www.hsph.harvard.edu/organizations/ddm/homepage.html>

Health Alliances International

1107 NE 45th Street, Suite 410
Seattle, WA 98105
Telephone: (206) 543-8382
Fax: (206) 685-4184

Helen Keller International (HKI)

90 Washington Street, 15th Floor
New York, NY 10006-2214
Telephone: (212) 943-0890
Fax: (212) 943-1220
<http://www.hki.org>

International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)

Center for Health and Population Research
Mohakhali, Dhaka 1000
Telephone: 880-2-882-3031
Fax: 880-2-882-3116
<http://www.icddrb.org>
<http://www.childhealthresearch.org>

International Clinical Epidemiology Network (INCLEN)

3600 Market Street
Philadelphia, PA 19104-2644
Telephone: (215) 222-7700
Fax: (215) 222-7741
<http://www.inclen.org>
<http://www.childhealthresearch.org>

International Eye Foundation

7801 Norfolk Avenue
Bethesda, MD 20814
Telephone: (301) 986-1830
Fax: (301) 896-1875

International HIV/AIDS Alliance

Queensbury House
104-109 Queens Rd.
Brighton BN1 3XF, UK
Telephone: 44-12-7371-8900
Fax: 44-12-7371-8901

Human Nutrition Institute

International Life Sciences Institute (ILSI)

1126 16th Street, NW
Washington, DC 20036
Telephone: (202) 659-0524
Fax: (202) 659-3617
<http://www.ilsa.org>

International Rescue Committee

122 East 42nd Street, 12th Floor
New York, NY 10168-1289
Telephone: (212) 551-3000
Fax: (212) 551-3186

International Science and Technology Institute (ISTI)

1820 North Fort Myer Drive, Suite 600
Arlington, VA 22209
Telephone: (703) 807-0236
Fax: (703) 807-0278
<http://www.mostproject.org>

JHPIEGO

Brown's Wharf
1615 Thames Street, Suite 200
Baltimore, MD 21231-3492
Telephone: (410) 614-2288 (*Maternal & Neonatal Health*)
Telephone: (410) 955-8558 (*Training in Reproductive Health*)
Fax: (410) 614-6643 (*Maternal & Neonatal Health*)
Fax: (410) 614-3458 (*Training in Reproductive Health*)
<http://www.mnh.jhpiego.org> (*Maternal & Neonatal Health*)
<http://www.jhpiego.jhu.edu/> (*Training in Reproductive Health*)

John Snow, Inc. (JSI)

1616 North Fort Myer Drive, 11th Floor
Arlington, VA 22209
Telephone: (703) 528-7474
Fax: (703) 528-7480
<http://deliver.jsi.com/>
<http://www.mothercare.jsi.com/>

Department of International Health
Johns Hopkins School of Public Health
Johns Hopkins University (JHU)
615 North Wolfe Street
Baltimore, MD 21205-2179
Telephone: (410) 955-3934 (*CHR: FHACS*)
Telephone: (410) 955-2061 (*Micronutrients for Health*)
Fax: (410) 955-7159 (*CHR: FHACS*)
Fax: 410-955-0196 (*Micronutrients for Health*)
<http://ih.jhsph.edu/chr/fhacs/fhacs.htm>
(*CHR: FHACS*)
<http://www.childhealthresearch.org>
(*CHR: FHACS*)
<http://www.jhu.edu/www/research/>
(*Micronutrients for Health*)

Center for Communication Programs
Johns Hopkins School of Public Health
Johns Hopkins University (JHU)
(*HCP and INFO*)
111 Market Place, Suite 310
Baltimore, MD 21202-4024
Telephone: (410) 659-6300
Fax: (410) 659-6266
<http://www.jhuccp.org>

Institute for International Programs
Johns Hopkins University (JHU)
(*HCS Fellows*)
103 East Mount Royal Avenue, Suite 2B
Baltimore, MD 21202
Telephone: (410) 659-4108
Fax: (410) 659-4118
<http://ih.jhsph.edu/hcsfp>

Joint United Nations Programme on HIV/AIDS (UNAIDS)

World Health Organization
1211 Geneva 27, Switzerland
Telephone: 41-22-791-4510
Fax: 41-22-791-4179
<http://www.us.unaids.org/>

Jorge Scientific Corporation

600 13th Street N.W., Suite 700
Washington, DC 20005
Telephone: (202) 393-9001
Fax: (202) 939-9018
<http://www.phnip.com>

POPTECH

LTG Associates, Inc.
1101 Vermont Avenue, NW
Suite 900
Washington, DC 20005
Telephone: (202) 898-9040
Fax: (202) 898-9057
<http://www.poptechproject.com>

Lutheran World Relief, Inc. (LWF)

390 Park Avenue South
New York, NY 10016-8803
Telephone: (212) 532-6350
Fax: (212) 213-6081

Macro International, Inc. (ORC Macro)

11785 Beltsville Drive, Suite 300
Calverton, MD 20705-3119
Telephone: (301) 572-0200
Fax: (301) 572-0999
<http://www.macoint.com/>

Management Sciences for Health (MSH)

Washington DC Office
1515 Wilson Blvd., Suite 710
Arlington, VA 22209
Telephone: (703) 524-6575
Fax: (703) 524-7898
<http://www.msh.org>

Management Sciences for Health (MSH)

MSH Headquarters
891 Centre Street
Boston, MA 02130
Telephone: (617) 524-7766
Fax: (617) 524-1363
<http://www.msh.org>

Map International

2200 Glynco Parkway
Brunswick, GA 31525-5000
Telephone: (912) 265-6010
Fax: (912) 265-6170

Massachusetts Public Health Biologic Laboratories (MPHBL)

305 South Street
Jamaica Plain, MA 02130
Telephone: (617) 983-6400
Fax: (617) 983-9081

Medical Care Development International (MCDI)

1742 R Street, NW
Washington, DC 20009
Telephone: (202) 462-1920
Fax: (202) 265-4978

Mercy Corps International

3030 SW First Avenue
Portland, OR 97201-4796
Telephone: (503) 796-6800
Fax: (503) 796-6844
<http://www.mercycorps.org>

Minnesota International Health Volunteers (MIHV)

122 West Franklin Avenue, Suite 621
Minneapolis, MN 55404-2480
Telephone: (612) 871-3759
Fax: (612) 871-8775
Committee on Population, HA172

National Academy of Sciences (NAS)

2101 Constitution Avenue, NW
Washington, DC 20418
Telephone: (202) 334-3167
Fax: (202) 334-3768
<http://www2.nas.edu/cpop/>

National Cooperative Business Association (NCBA)

1400 16th Street, NW, Box 25
Washington, DC 20036
Telephone: (202) 328-5180
Fax: (202) 328-5175
<http://www.cooperative.org>

**Fogarty International Center
National Institutes of Health (NIH)**

Building 31, Room B2CO8
31 CENTER DR MSC 2220
Bethesda, MD 20892-2075
Telephone: (301) 496-2075
Fax: (301) 594-1211
<http://www.nih.gov>

Pal-Tech, Inc.

1201 Pennsylvania Avenue, NW, Suite 250
Washington, DC 20004
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Pact, Inc.

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The People-to-People Health Foundation

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U.S. Peace Corps (HRS II)

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U.S. Pharmacopeia Convention, Inc.

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World Health Organization
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Health Technologies/Vaccines and Biologics
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Bureau for Global Health Information Directories

Country Coordinator/Team List

Information - Country Coordinator/Team List

~ Africa Region ~

Country	Country Coordinator	GH/HIV/AIDS Point Person*	GH/RCS Rep	GH Senior Advisor**	AFR/SD Rep	AFR Bureau Desk Officer	Mission Director	Mission PHN Contacts (PHNO bolded)
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Ghana	Steve Hawkins (202-712-4739) Carter Diggs (202-712-5728)	David Stanton	Julie Chitty	Joyce Holfeld	Subhi Mehdi	Edith Houston AFR/WA	Sharon Cromer	Ursula Nadolny (233-21-228440) Lawrence Aduonum-Darko, Jane Wickstrom, Peter Wondergem, Juliana Pwamang, Jan Paehler, Thomas Asare
Kenya	Naomi Blumberg (202-712-4546) Linda Sussman (202-712-5942)	Linda Sussman	Willa Pressman	Scott Radloff	TBD	Julia Escalona AFR/EA	Kiertisak Toh	Janet Paz-Castillo (254-2-86-2400) Mike Strong, Richard Osmanski, Cheryl Sonnichsen, Sheila Macharia, Bedan Gichanga, Emma Mwamburi, Jerusha Karuthiru, Chrispus Kamanga
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Country Coordinator/ Team List (as of 3/21/03)

Country	Country Coordinator	GH/HIV/AIDS Point Person*	GH/RCS Rep	GH Senior Advisor**	AFR/SD Rep	AFR Bureau Desk Officer	Mission Director	Mission PHN Contacts (PHNO bolded)
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Information - Country Coordinator/Team List

Country Coordinator/ Team List (as of 3/21/03)

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Country Coordinator/ Team List (as of 3/21/03)

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Yemen	Nahoko Nakayama (202-712-5476)			--	Gary Cook ANE/TS	Abdel Moustafa ANE/MEA	Doug Heisler (USAID Rep) (as of 4/03)	Achmed Atieg, Fawzia Youssef
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~ Europe and Eurasia Region ~

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Planning Countries

West/NIS-Regional Mission Ukraine Moldova Belarus	Bonnie Ohri (202-712-1018) Alternate TBD	Harriett Destler	Team Leader: Bonnie Ohri HIV/AIDS: Bonnie Ohri Sangita Patel Women's Health: Mary-Jo Lazear TB/Infectious Disease: Julia Wallace	TBD	PHN Chief, Mary-Ann Micka Strategy: Paul Holmes Infectious Disease: Tim Clary AIHA/Health Reform: Forest Duncan	Yvette Malcioln Moldova/Belarus Bob Wallin (Ukraine) EE/EA/WN	Christopher Crowley (Ukraine)	Nancy Godfrey (380-44-462-5678) <u>W/NIS Regional</u> : Olena Radziyevska, Borys Uspensky, Alina Yurova, Irina Gladun, Konstantin Yakubenko <u>Ukraine</u> : Natalia Tokalenko <u>Moldova</u> : John Starnes <u>Belarus</u> : Christine Sheckler, Igor Smalyuk
CAR/Regional and Kazakhstan	Sangita Patel (202-712-0575) Cheri Vincent (202-712-1279)							
Kyrgyzstan						Tim Alexander EE/EA/CAR Claire Ehmann EE/EA/CAR	George Deikun	Jennifer Adams (7-3272-50-76-12), Mary Skarie, Sholpan Makhmudova, Indira Aitmagambetova, Almaz Sharman, Angela Lord, Khorlan Izmailova, Azima Rouzouddinova ----- Damira Bibosunova Alisher Ishanov , Andreas Tamberg, Jim Goggin ----- Aziza Khamidova , Michael Harvey ----- Elena Samarkina , John Kropf
Uzbekistan								
Tajikistan								
Turkmenistan								
Caucasus Armenia	Mary-Jo Lazear (202-712-5595) Alternate TBD					Jeanne Briggs EE/EA/ARM	Keith Simmons	Edna Jones (374-1-529-975), Anna Grigoryan
Georgia/Azerbaijan	Bonnie Ohri (202-712-1018) Emily Wainwright (202-712-5469)					Jennifer Ragland EE/EA/CAU	Michael Farbman	Kent Larson (995-32-77-85-40), <u>Georgia</u> : Catherine Fischer, Gegi Mataradze, Khalid Khan, Pavel Basiladze; <u>Azerbaijan</u> : Valerie Ibaan, Gulnara Rahimova
Europe Albania	Mary-Jo Lazear (202-712-5595) Victoria Ellis (202-712-4637)					Francesca Nelson EE/ECA	Harry Birnholz	Pam Wyville-Staples (355-410-1222) Zhaneta Shatri, Barry Primm
Romania	Mary-Jo Lazear (202-712-5595) Vicki Ellis (202-712-4637)					Michael Eddy EE/ECA	Denny Robertson	Jane Nandy (40-21-410-1222) Susan Monaghan, Gabriela Paleru, Lucia Correll, Dana Buzducea
Bulgaria	Mary-Jo Lazear (202-712-5595) Amy Leonard (202-66-0376)					Valerie Kwok EE/ECA	Debra Dewitt McFarland	Rayna Dimitrova (359-2-951-5381) Ivanka Tzankova, Assia Alexieva, Katia Alexieva
Hungary	Tim Clary (E&E) (202-712-0588) Bonnie Ohri (202-712-1018)					Marilynn Schmidt	Hilda M. Arellano	Sigrid Anderson (361-475-4206) Heather Goldman
Croatia	Upama Khatri (202-661-0384) Norma Wilson (202-712-0667)					Anne Convery	William Jeffers	Charles Howell (385-1-604-0909) Vladimira Dukic
Bosnia	Julie Wallace (202-712-0428)					Susan Fertig-Dykes	Howard Sumka	Babette Prevot (387-33-619-211), Pat Jacobs, Elvira Challenger
Kosovo	Chris Thomas (202-712-1092)					Allyson Stroschein	Dale Pfeiffer	Urim Ahmeti (381-38-243-673)

For corrections or changes, please contact Nahoko Nakayama, nnakayama@usaid.gov (202-712-5476)

Information - Country Coordinator/Team List

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Country Coordinator/ Team List (as of 3/21/03)

Country	Country Coordinators	GH/HIV/AIDS Point Person*	GH/RCS Rep	GH Senior Advisor**	E&E Bureau Rep	E&E Bureau Desk Officer	Mission Director	Mission PHN Contacts (PHNO bolded)
Macedonia	Bonnie Ohri (202-712-1018) Tim Clary (202-712-0588)	Harriett Destler	Team Leader: Bonnie Ohri	TBD	PHN Chief, Mary-Ann Micka	Stacia George	Dick Goldman	Heather Goldman (389-2-380-446)
Serbia	Mary Jo Lazear (202-712-5595) Chris Thomas (202-712-1092)		HIV/AIDS: Bonnie Ohri Sangita Patel		Strategy: Paul Holmes	Sarah Farnsworth	Spike Stephenson	Alonzo Fulgham (381-11-645-092), Sergey Anagnosti
Baltics (Lithuania,, Latvia, Estonia)	Tim Clary (E&E) (202-712-0588) Bonni Ohri (202-712-1018)		Women's Health: Mary-Jo Lazear TB/Infectious Disease: Julia Wallace		Infectious Disease: Tim Clary AIHA/Health Reform: Forest Duncan	Marilynn Schmidt EE/ECA	N/A	Sigrid Anderson (Heather Goldman 36-30-555-3687- Hungary) Geidra Gureviciute (3702-221-666- Lithuania), Hilda Arellano

For questions regarding country coordination in E&E region, please contact the GH/RCS E&E Team Leader, Bonnie Ohri at 202-712-1018 (bohri@usaid.gov)

For corrections or changes, please contact Nahoko Nakayama, nnakayama@usaid.gov (202-712-5476)

Country Coordinator/ Team List (as of 3/21/03)

Country	Country Coordinator	GH/HIV/AIDS Point Person*	GH/RCS Rep	GH Senior Advisor**	LAC Bureau Rep	LAC Bureau Desk Officer	Mission Director	Mission PHN Contacts (PHNO bolded)
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Programming Countries

Peru	Elizabeth Fox (202-712-5777) Estelle Quain (202-712-4463)	--	Mary Vandenbroucke	Margaret Neuse	Lindsay Stewart LAC/RSD	Ernie Rojas LAC/SAM	Patricia Buckles	Dick Martin (011-11-618-1200) Luis Seminario, Jaime Chang, Lucy Lopez, Shannon Marsh
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Special Circumstance Countries

Brazil	Ellen Starbird (202-712-0847) John Novak (202-712-4814)	John Novak	Mary Vandenbroucke	N/A	David Piet LAC/RSD	Laura Libanati LAC/SAM	Richard Goughnour	Kevin Armstrong (011-55-61-312-7000) Nina Lentini, Jaime Rojas
Haiti	Dale Gibb (202-712-0753) Jessica Pollak (202-712-4719)	Glen Post	Karen Nurick	Anne Peterson	David Piet LAC/RSD	Clinton (Tony) Dogget LAC/CAR	David Adams	Carl Abdou Rahmaan (509-222-5500) Polly Dunford, Yves Marie Bernard, Pierre Mercier, Marlene Charolotin
Mexico	Deborah Lans (202-712-4625) Estelle Quain (202-712-4463)	--		TBD	David Piet LAC/RSD	Mike Kerst LAC/CEN	Paul White	Paul White (011-525-080-2574) Nancy Alvey

Planning Countries

Bolivia	Jennifer Luna (202-712-0537) Wyman Stone (202-712-5605)	--	Mary Vandenbroucke	--	Lindsay Stewart LAC/RSD	Laura Libanati LAC/SAM	Liliana Ayalde	Susan Brems (011-591-2-2786768) Jorge Velasco, Rocio Lara, Angel Vasquez, Stanley Blanco, Edgar Muñoz
Dom. Republic	Karen Nurick (202-712-5024) Diana Prieto (202-712-0662)	Estelle Quain	Karen Nurick	--	David Piet LAC/RSD	Sonya Heller LAC/CAR	Elena Brineman	David Losk (809-221-1100 ext 7020) Sarah Majerowicz, Maria Castillo
El Salvador	Mary Vandenbroucke (202-712-4758) Jim Griffin (202-712-0618)	--	Mary Vandenbroucke	--	Lindsay Stewart LAC/RSD	Sheldon Schwartz LAC/CEN	Mark Silverman	Connie Johnson (503-298-1666) Alba Amaya Karen Welch, Raul Toledo, Maricarmen Estrada
Guatemala	Karen Nurick (202-712-5024) Sam Kahn (202-712-0785)	--	Karen Nurick	--	Lindsay Stewart LAC/RSD	Mike Kerst LAC/CEN	Glenn Anders	Mary Ann Anderson (502-332-0202) Edward Scholl, Baudilio Lopez, Anabella Sanchez
Guyana	Frances Davidson (202-712-0982) Diana Prieto (202-712-0662)	--	Karen Nurick	--	Lindsay Stewart LAC/RSD	Sonya Heller LAC/CAR	Mike E. Sarhan	Mike Sarhan (011-592-22-57315) Bill Slater
Honduras	Karen Cavanaugh (202-712-5859) Kellie Stewart (202-712-4548)	Estelle Quain	Karen Nurick	--	Lindsay Stewart LAC/RSD	Aler Grubbs LAC/CEN	Paul Tuebner	John Rogosch (011-504-236-9320) Meri Sinnitt Herb Caudill, Angel Coco, Ernesto Pinto, Lisa Luchsinger
Jamaica	Sheila Lutjens (202-712-5734) Leola Thompson (202-712-0997)	--	Karen Nurick	--	Lindsay Stewart LAC/RSD	Dan Riley LAC/CAR	Mosina H. Jordan	Margaret Sancho (876-926-3645) Jennifer Knight-Johnson, Ann Marie Campbell, Bridget Fong Yee
Nicaragua	Merri Weinger (202-712-4531) Maggie Farrell (202-712-0458)	--	Karen Nurick	--	Lindsay Stewart LAC/RSD	Sheridan Plunkett LAC/CEN	James Vermillion	Katie McDonald (505-267-0502) Alonso Wind, Claudia Evans Baltodano
Paraguay	Mary Vandenbroucke (202-712-4758) Elizabeth Fox (202-712-5777)	--	Mary Vandenbroucke	--	Lindsay Stewart LAC/RSD	Sarah-Anne Lynch LAC/SAM	Wayne Nilsestuen	Graciela Avila (011-595-220-715 thru 720) Jerry Barth, Enrique Villalba, Jocelyn Betancourt

For corrections or changes, please contact Nahoko Nakayama, nnakayama@usaid.gov (202-712-5476)

Information - Country Coordinator/Team List

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Country Coordinator/ Team List (as of 3/21/03)

Country	Country Coordinator	GH/HIV/AIDS Point Person*	GH/RCS Rep	GH Senior Advisor**	LAC Bureau Rep	LAC Bureau Desk Officer	Mission Director	Mission PHN Contacts (PHNO bolded)
Regional Initiatives								
Central America (HIV/AIDS)	Estelle Quain (202-712-4463) Karen Nurick (202-712-5024)	Estelle Quain	Karen Nurick	--	Lindsay Stewart LAC/RSD	Mike Kerst LAC/CEN	Glenn Anders	Stan Terrell (502-332-0202)
Caribbean	Karen Nurick (202-712-5024) Diana Prieto (202-712-0662)	Estelle Quain	Karen Nurick	--	Lindsay Stewart LAC/RSD	Dan Riley LAC/CAR	Mosina H. Jordan	Joan Atkinson (Jamaica) (876-926-3645)

Ecuador Tel # 011-593—2-223-2100

For questions regarding country coordination in LAC region, please contact the GH/RCS LAC Team Leader, Karen Nurick at 202-712-5024 (knurick@usaid.gov)
For corrections or changes, please contact Nahoko Nakayama, nnakayama@usaid.gov (202-712-5476)

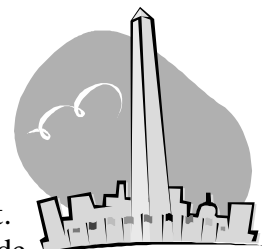
NOTES

- * GH HIV/AIDS point person for ANE is Clif Cortez; Estelle Quaine (LAC), Harriett Destler (E&E), and Pam Wolf (AFR) are acting point persons pending the recruitment of new GH/OHA staff to fill these positions.
- ** GH is in the process of updating the list of countries that will have Senior Advisors, and the selection of GH senior staff to serve as Senior Advisors. A new list is expected o/a April, 2003.

Bureau for Global Health Information Directories

TDYs/Visits to USAID/Washington

TDYs/Visits to USAID/Washington



Who to contact prior to your TDY?

Contact your Country Coordinator and RCS Regional Assistant prior to your visit. RCS Regional Assistants can help you organize your meeting schedule and provide information on the rates and locations of hotels in the area.

AFR Regional Assistant- Celeste Gregory (202-661-0373, cgregory@pal-tech.com)

ANE Regional Assistant - Nahoko Nakayama (202-712-5476, nnakayama@usaid.gov)

E&E Regional Assistant - Upama Khatri (202-661-0384, ukhatri@pal-tech.com)

LAC Regional Assistant - Jamie Brimhall (202-661-0365, jbrimhall@pal-tech.com)

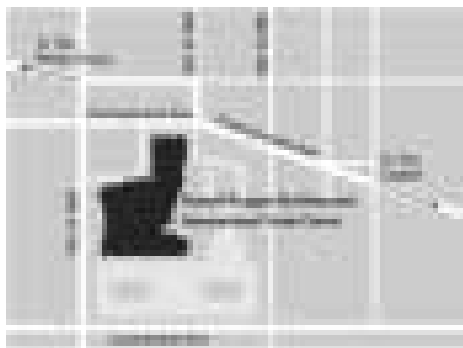
Where?

USAID/Washington

Ronald Reagan Building and International Trade Center (RRB)

1300 Pennsylvania Avenue, NW

Washington, DC 20004



The Ronald Reagan Building and International Trade Center is located on historic Pennsylvania Avenue in the heart of Washington, DC, within walking distance of the White House, the Capitol, Smithsonian Museums and other prominent businesses, historical sites and cultural organizations

How to get here?

By Metro (subway)

The **Federal Triangle** metro stop (blue and orange lines) is connected to the RRB by a covered passageway. In addition, **Metro Center** (blue, orange, and red lines) and **Smithsonian** (blue and orange lines) are within easy walking distance.

How to get into the RRB?

Check-in at the USAID Visitor Desk located in the 14th Street Entrance Lobby to receive your building pass. The 13th street side elevator will be closed at 7pm. After 7pm, please use the 14th street side elevator.

USAID Employees (Direct-hires and USPCSs):

Provide photo identification, e.g., passport or driver's license. The Visitor Desk staff will verify the individual's employment and security clearance. After the employee signs for the TDY Building Pass, it will be issued and will be valid for the period of the TDY.

FSNs, Fellows and External Visitors:

Provide photo identification, e.g., passport or driver's license to receive a Visitor Pass. Prior to your visit, make an arrangement to have an escort meet you at the 14th Street USAID Lobby. You will need to be escorted at all time in the RRB and check-in daily.

Bureau for Global Health Information Directories

**Quick Guide to GH Bureau
Country Support Services**

Quick Guide to GH Bureau Country Support Services

Assignments: FS assignment guidance and support

Gary Newton 202-712-5912/ Sharon Carney 202-712-5107

Budget (OYB): Status; resource allocation process

Joyce Holfeld 202-712-5138/ Leola Thompson 202-712-0997

Country Support Teams: status, roles/functions (Country Coordinators, Alternates, Senior Advisors), selection process

RCS Team Leaders Africa- Willa Pressman 202-712-0187
 ANE- Vathani Amirthanayagam 202-712-5239
 E&E- Bonnie Ohri 202-712-1018
 LAC- Karen Nurick 202-712-5024

Country program documents: Country Strategies, Profiles, Annual Reports, PMPs, RFPs and RFAs

RCS regional assistants Africa- Celeste Gregory 202-661-0373
 ANE- Nahoko Nakayama 202-712-5476
 E&E- Upama Khatri 202-661-0384
 LAC- Jamie Brimhall 202-661-0365

Coverage: assistance with filling short-long-term gaps in Mission PHN staffing

Your Country Coordinator

Fellows/TAACS/CASU program

Rochelle Thompson (Michigan/PLP/JHU Fellow) 202-712-0998
Sharon Carney 202-712-5107
Clara Davis (CASU) 202-712-5505

Field Support (\$)

Wyman Stone 202-712-5605

Former DH FSO list:

Nahoko Nakayama 202-712-5476

Hotel information in Washington

Jamie Brimhall 202-661-0365

HIV/AIDS Point Person on Country Teams

Roxana Rogers 202-712-0933

International Development Intern (IDI) Program: recruitment, orientation, placement

Gary Newton 202-712-5912/ Sharon Carney 202-712-5107

Literature search: CDIE

Lane Vanderslice 202-712-4616

Mission addresses/contact info: for PHN Missions

Your RCS Regional Assistant

New Entry Professional (NEP) Program: recruitment, orientation, placement

Gary Newton 202-712-5912/ Sharon Carney 202-712-5107

Newsletter/PHN Forum

Mark Austin 202-712-1001

Performance monitoring: questions about; assistance with

Mark Austin 202-712-1001/ Vathani Amirthanayagam 202-712-5239

SOTA

Karin Turner 202-712-5884 with RCS Team Leaders

Strategic planning: questions about; assistance with

Mark Austin 202-712-1001

Technical assistance

Your Country Coordinator

TDY to USAID/Washington

Your Country Coordinator and RCS Regional Assistant

Training/professional development opportunities

Karin Turner 202-712-5884

Users' Guide

Michael Gibson 202-661-0374

Website

Karin Turner 202-712-5884

Erin Broekhuysen 202-393-9001 (ebroekhuysen@phnip.com)

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